

Association for Career and Technical Education Research
ACTER MEMBERSHIP APPLICATION

Membership period is for one year (January 1 to December 31).

Fill out form, attach check, and return to:

James Knight
ACTER National Treasurer
College of Agriculture and Life Sciences
Department of Agricultural Education
PO Box 210036
Tucson, AZ 85721-0036
520-621-9144

- ❖ Make checks payable to **ACTER**
- ❖ Dues from outside the USA should be paid in US dollars.
- ❖ Please, NO purchase orders or credit cards

Membership Category: _____ **New** _____ **Renewal**

_____ Regular (\$40.00)
_____ Emeritus (\$10.00)
_____ Student (\$10.00)

Name: _____

Title or Position: _____

Institution or Organization: _____

Preferred Mailing Address: _____

Phone Number (include area code): _____ **FAX:** _____

E-mail address: _____

Web Page URL: _____

ACTER maintains an organizational web site that includes a roster of members. If you wish any information **NOT** to be listed, please indicate below:

Do **NOT** list my name _____

Do **NOT** list my institution/affiliation _____

Do **NOT** list my e-mail address _____

Do **NOT** list my web site URL _____

ACTE Divisions (check one or more):

_____ Administration	_____ Guidance	_____ Technical Education
_____ Adult Workforce Development	_____ Health Occupations	_____ Technology Education
_____ Agricultural Education	_____ Marketing	_____ Trade and Industrial
_____ Business Education	_____ New and Related Services	_____ Education
_____ Family and Consumer Sciences	_____ Special Needs	_____ Other _____

Please list two areas of research expertise and/or interest for the membership directory:
