



Annual CIT Membership Application

Conference of Interpreter Trainers
November 1, 2018 – October 31, 2019

Send to: *Membership Director*
CIT
P.O. Box 2134 Fremont, CA 94536
Questions: webmaster@cit-asl.org

Please print all information clearly!

Today's Date: _____

Date Received: _____

Member's Information

Name: _____

Address: _____

Home Ph# _____ v/tty/vp

Work Ph# _____ v/tty/vp

VP # _____

Email: _____

Institutional Affiliation: _____

Website: _____

I would like to join the following committee:
Check one or more:

<input type="checkbox"/> Research & Publications	<input type="checkbox"/> Nominations
<input type="checkbox"/> Professional Development	<input type="checkbox"/> Grievance
<input type="checkbox"/> Communication/ Tech	<input type="checkbox"/> Fundraising
<input type="checkbox"/> Scholarship & Awards	<input type="checkbox"/> Membership
<input type="checkbox"/> PR & Outreach	<input type="checkbox"/> By-laws

Membership Categories:

Full Membership (Voting) *Teachers, mentors, researchers, speakers*
 1-year: \$130 US _____
 2-years: \$200 US _____

Associate Membership (Non-Voting) *Not actively teaching/research*
 1-year: \$ 98 US _____
 2-years: \$150 US _____

International Member: (Non-Voting): *Live outside of the US*
 1-year rate: \$ 40 US - €35.76 EUR _____
 2-year rate: \$ 80 US - €71.51 EUR _____

Retired Member (Non-Voting):
 1-year rate: \$ 39 _____
 2-Year rate: \$ 60 _____

Institutional Membership (Non-Voting): *Organizations only*
 1-year rate: \$260 _____
 2-Year rate: \$400 _____

Donation: (Please Select) \$ _____
 ___ Convention Scholarship ___ General Fund

TOTAL: \$ _____

Payment Method:

___ Check or ___ Money Order Check #: _____
\$20 fee charged on all returned checks!

To Pay Via Credit Card, please visit our website:
 cit-asl.org

NEW Members ONLY - PRO-RATED Dues!
RENEWING? This does not apply to you.

November – January:	Pay full amount
February – April:	Pay 3/4 of dues
May – July:	Pay 1/2 of dues
August – October:	Pay full amount for membership valid to 10/31/2018

Office Use Only: 10/18-19 Date Entered: _____

Notes: _____