



Membership Application/Renewal

Join or renew online at www.matsol.org

First Name _____ Last Name _____

Email (required) _____

** District and institutional spam filters sometimes block MATSOL email messages. Make sure your system accepts email from memberclicks.com, our system administrator, and matsol.org.*

Contact Information

Address _____ This is my home work

Address, cont. _____

City _____ State _____ Zip _____

Work Phone _____ Personal Phone _____

Professional Affiliation

Job Title _____

School District/Institution _____

School/Department _____

Membership Benefits

Do you want to receive MATSOLworks job listings? Yes No

Special Interest Groups – Circle Two

1 st Choice	Elementary Ed Adult Ed	Secondary Ed Workplace Ed	Low Incidence Programs Community College	Bilingual/Dual-Language Higher Education ESOL/IEPs	Bilingual Special Ed
2 nd Choice	Elementary Ed Adult Ed	Secondary Ed Workplace Ed	Low Incidence Programs Community College	Bilingual/Dual-Language Higher Education ESOL/IEPs	Bilingual Special Ed

Annual Membership Dues

Professional \$40.00 Retired \$25.00 Full-Time Student* \$25.00

Payment by Check Purchase Order Payment Enclosed \$ _____

Mail a purchase order or check to
MATSOL
2 Canton Street, Suite B-223
Stoughton, MA 02072

** Full-time student membership is for those engaged in full-time study only (12 or more credits undergraduate, 6+ credits master's/graduate, 3+ credits doctoral). Students must provide a dated unofficial transcript to verify full-time study by mail or email (matsol@matsol.org).*