

ARKANSAS

Council of Teachers of Mathematics

Please print out this print out this form and mail to:

Retha Gipson, Treasurer ACTM
2654 Hwy. 349
Jonesboro, AR 72404
Membership dues \$15 per year
(\$7.50 for pre-service teachers or retired teachers)

First Name: _____ Last Name: _____

Home Address: _____ Phone: (____) _____

City: _____ State: _____ Zip + 4: _____

School Name: _____

School Address: _____ Phone: (____) _____

City: _____ State: _____ Zip + 4: _____

Teaching Level: Elem _____ Middle _____ Jr. High _____ High _____ 2-Yr Clg _____ 4-Yr Clg _____

Position: Teacher _____ Chair _____ Supervisor _____ Other _____

Dept. of Ed. Specialist: Elem _____ Secondary _____

E-Mail: _____

NCTM Member?: _____