



Non-Conference Member Registration Form

Last Name:		First Name:		M. I.	File under what letter?		
Mailing Address: .							
City, State, ZIP:							
Home Phone:			Work Phone:			Cell Phone:	
Fax Number (home or work?)				Email:			
School/Institution:							
Check Language(s) you teach: ✓	French	Spanish	German	Russian	Latin	ESL	Other
Check Level(s) you teach: ✓	Elem. School		Middle School	High School	University		Other
Immersion Program: ✓	Elem. School		Middle School	High School	University		

Fees for Non-Conference Membership: all fees non-refundable, no exceptions		
		Amount
\$25	Membership only (I wish to receive newsletter and be on Email list.)	\$
Total Amount Due		\$

Mail form and payment to:

**LFLTA Treasurer Sarah Young
P.O. Box 9262
Monroe, LA 71211**