



## Arizona Technology in Education Alliance

**Membership Application - Please fill out the information below and mail this form with \$35.00 to:**

**AzTEA**

1753 E. Broadway, Suite 101, PMB 292  
Tempe, AZ 85282

**Chapter Affiliation:**       Eastside Chapter       Northern Chapter  
    Westside Chapter       Southern Chapter

**Application Type:**       New       Renewal

Name: \_\_\_\_\_

School/Organization: \_\_\_\_\_

District Name: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Work Address: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Model Phone: \_\_\_\_\_

School/Org Email: \_\_\_\_\_

School/Org Website: \_\_\_\_\_

Release my business address to vendors:  Yes  No

Home Address: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Personal Email: \_\_\_\_\_

Use home address for all correspondence:  Yes  No