CEIA Membership Application 2011-2012

Name: _____Email: _____

New Members/Change of address:

Street: _____City: _____Zip: _____

Home phone: _____Other phone: _____

Department/Area of instruction: _____

Annual dues: $10.00* $_____enclosed

Please make checks payable to CEIA.

Send to: Dave Mathers-Winn, CEIA Treasurer
Schott Center
310 West Padre
Santa Barbara, California 93105

*You are welcome to donate more money if you like!

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