



AZ ASCD
8050 N. 19th Ave. #148
Phoenix, AZ 85021

WWW.AZASCD.ORG



AZ ASCD

"THE PREMIER
PROFESSIONAL
ASSOCIATION FOR
EDUCATORS"

AZ ASCD IS THE ARIZONA
AFFILIATE OF ASCD
INTERNATIONAL

WWW.AZASCD.ORG

AZ ASCD is the Arizona Affiliate of ASCD International. AZ ASCD is a professional organization that brings together classroom and pre-service teachers, staff developers, site and central office administrators, higher education faculty, school board members, parents, and business and community members who want to work together to provide expert and innovative solutions that address opportunities and challenges facing Arizona learners.

Questions?

Contact
Dr. Melissa Sadorf, Executive Director
executivedirector@azascd.org
(520) 266-0081

HOW WILL YOU BENEFIT FROM JOINING AZ ASCD?

- Professional development offerings at local member rates
- Networking opportunities and events
- Updates on educational issues and research
- Leadership opportunities
- Influence in the educational community through advocacy
- Membership in a community committed to supporting educators and students in Arizona

JOIN AZ ASCD TODAY!

- On the web at www.azascd.org
- Through ASCD's joint dues program at www.ascd.org (single year membership only)
- By mailing in this form with payment

QUESTIONS?

Contact

Dr. Melissa Sadorf, Executive Director
executivedirector@azascd.org
(520) 266-0081



MISSION

Building communities to improve the quality of teaching and learning for all.

VISION

AZ ASCD is transforming teaching and learning by supporting Arizona Educators.

WHAT'S NEW FOR AZ ASCD

INSTITUTIONAL MEMBERSHIPS!

Join as a district team (up to four members) to enjoy discounted membership fees.

MULTIYEAR INDIVIDUAL MEMBERSHIPS!

Save the bother of joining each year and save money by paying for a multiple year membership.

WWW.AZASCD.ORG

AZ ASCD MEMBERSHIP

TYPE OF MEMBERSHIP:

CHOOSE AN OPTION BELOW

- INDIVIDUAL \$35
- INDIVIDUAL MULTIYEAR
 - 2 YR \$65
 - 3 YR \$95
- INSTITUTIONAL \$105 - UP TO 4 MEMBERS
(FILL OUT SEPARATE FORMS FOR EACH MEMBER; MAIL IN ONE ENVELOPE)

CIRCLE ONE: DR. MRS. MISS MS. MR.

NAME (PRINT CLEARLY)

TITLE/POSITION

SCHOOL/ORGANIZATION/AGENCY

PREFERRED MAILING HOME WORK

STREET #

CITY

STATE

ZIP CODE

WORK NUMBER

HOME NUMBER CELL NUMBER

EMAIL ADDRESS

WHERE DID YOU HEAR OF US? _____

NEW RENEWAL

CHECKS AND/OR P.O.'S PAYABLE TO: AZ ASCD

AZ ASCD

8050 N. 19TH AVE. #148

PHOENIX, AZ 85021