



Alpha Upsilon Alpha Honor Society of the International Literacy Association

MEMBERSHIP APPLICATION

Student Members—Undergraduate and Graduate

Membership in Alpha Upsilon Alpha requires that an individual also be a member of the International Literacy Association.

Contact Information

FIRST NAME: _____ INITIAL: _____ LAST NAME: _____

MAILING ADDRESS: _____

ADDRESS LINE 2: _____

CITY: _____	STATE/ PROVINCE: _____	COUNTRY: _____	ZIP CODE/ POSTAL CODE: _____
E-MAIL: _____		PHONE: _____	
CHAPTER: _____		ADVISOR NAME: _____	
COLLEGE OR UNIVERSITY: _____			

Dues and Membership Options

SOCIETY DUES: \$12.00 \$ _____

ILA DUES:

- I am currently an ILA member. My membership number and expiration date: _____
- I am joining ILA. I have indicated my choice of membership below.

CHECK MEMBERSHIP SELECTION:

- Student Membership (includes digital issues of *Literacy Today*)\$39.00 \$ _____
- Student Membership with any ONE journal.....\$57.00 \$ _____
- Student Membership with any TWO journals.....\$75.00 \$ _____
- Student Membership with any THREE journals.....\$93.00 \$ _____

CHECK JOURNAL SELECTION:

- The Reading Teacher*
For educators of students up to age 12
- Journal of Adolescent & Adult Literacy*
For educators of older learners
- Reading Research Quarterly*
The leading journal of literacy research

TOTAL AMOUNT DUE:..... \$ _____

Method of Payment

Amounts are quoted in U.S. dollars and must be paid in U.S. funds.

CHECK # _____ MADE PAYABLE TO ILA

VISA MASTERCARD AMEX DISCOVER CREDIT CARD NUMBER _____ CVV CODE _____ EXPIRATION DATE _____

CARDHOLDER SIGNATURE _____ CARDHOLDER NAME AS IT APPEARS ON CREDIT CARD _____

SEND THIS FORM WITH PAYMENT:

- By **MAIL** with check to the International Literacy Association, PO Box 8139, Newark, DE 19714-8139
- By **E-MAIL** with credit card payment to chapters@reading.org
- By **FAX** with credit card payment to 302.737.0878, Attention: Chapter Administrator