



American Montessori Society
 281 Park Avenue South, New York, NY 10010-6102
 212-358-1250 p 212-358-1256 f
 www.amshq.org

AMS Individual Membership Application/Renewal

Apply/renew online: www.amshq.org/membership

By mail: American Montessori Society, 281 Park Avenue South, New York, NY 10010

By fax: 212-358-1256

Information: Marcy Rice: marcyrice@amshq.org or 212-358-1250 x 310

Name _____ E-mail _____

Address _____

City _____ State/Province _____ Zip _____

Country _____

Phone (day) _____ Phone (evening) _____

This membership renewal/application will run July 1, 2008 – June 30, 2009.

Your Membership:

Check all that apply:

- I am a faculty member of an AMS-affiliated teacher education program (TEP)
TEP _____
- I am a Montessori-credentialed teacher

Credential Level	Month & Year Rec'd	TEP
_____	_____	_____
_____	_____	_____

- Your name as it appears on credential(s) _____
- This is a renewal membership. My member number is _____
- This is a new membership. I am a teacher.
- This is a new membership. I am not a teacher.

Select: Memberships except "\$25 Membership outside USA" include subscription to *Montessori Life*.

- \$55 Membership within USA – expires **June 30, 2009**
- \$25 Membership outside USA – expires **June 30, 2009**
- \$65 Membership outside USA (plus subscription to *Montessori Life*) – expires **June 30, 2009**

Payment:

Enclosed is my check or money order payable to the American Montessori Society in the amount of \$ _____
 Check # _____ Payable in U.S. dollars and drawn on U.S. bank only.

Charge \$ _____ to my VISA MasterCard Discover Card
 Cardholder _____ Account Number _____
 Cardholder Address _____ City, State/Province _____
 Zip/Postal Code _____ Country _____
 Expiration Date _____ 3-Digit Security Code on Reverse of Credit Card _____
 Signature _____