



CALIFORNIA'S ADVOCATE FOR HIGH QUALITY SCIENCE EDUCATION

## CSTA Membership Application

*Join Our Community Today!*

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
School or Organization \_\_\_\_\_  
District \_\_\_\_\_  
Address \_\_\_\_\_  Work  Home  
City, State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
E-Mail\* \_\_\_\_\_ Twitter \_\_\_\_\_  
Classroom Teacher  Yes  No Grade(s) you teach \_\_\_\_\_  Teachers  Other Educators  
Science(s) you teach \_\_\_\_\_

### EMAIL PREFERENCES

Please check the email lists you wish to subscribe to:

- |   |   |
|---|---|
| <input type="checkbox"/> California Classroom Science bi-monthly E-newsletter | <input type="checkbox"/> Middle School/Junior High (6-8)      |
| <input type="checkbox"/> Primary (TK-2)                                       | <input type="checkbox"/> High School (9-12)                   |
| <input type="checkbox"/> Upper Elementary (3-5)                               | <input type="checkbox"/> Regional News, Events, and Resources |

\*By including my email address, you consent to receive electronic communications from the California Science Teachers Association to the email address you've provided and understand that consent may be revoked at your discretion by notifying CSTA at the address below.

### TYPE OF MEMBERSHIP

- |   |       |
|---|-------|
| <input type="checkbox"/> 1 year.....  | \$50  |
| <input type="checkbox"/> New Teacher (1st or 2nd year only) - 2 years ..... | \$50  |
| <input type="checkbox"/> 3 years (save \$30) .....                          | \$120 |
| <input type="checkbox"/> Preservice Teacher .....                           | \$25  |
| <input type="checkbox"/> Retired .....                                      | \$30  |
| <input type="checkbox"/> Lifetime.....                                      | \$500 |
| <input type="checkbox"/> Corporate (supporting member).....                 | \$150 |

### METHOD OF PAYMENT *(Make checks payable to CSTA)*

Check or P.O. # \_\_\_\_\_

School/District \_\_\_\_\_

Visa  MC  AMEX  Discover

Card# \_\_\_\_\_

Vcode \_\_\_\_\_ Exp. \_\_\_\_\_

Billing Address \_\_\_\_\_

City, State \_\_\_\_\_ Zip \_\_\_\_\_

Signature \_\_\_\_\_

### PRIVACY INFORMATION

CSTA respects your privacy and never sells your email address or phone number to any third party. CSTA does provide mailing lists of conference registrants to exhibiting companies and from time to time sells member mailing addresses to parties interested in mailing relevant information (see full privacy policy at [cascience.org/privacy-policy](http://cascience.org/privacy-policy)). CSTA approves all mailings prior to selling member addresses. You can opt-out of having your mailing address shared by checking the box below.

Keep Mailing Address Private

Faxed forms will be accepted with credit card and purchase orders only.  
Fax orders to CSTA at (916) 294-0415 or mail form to: CSTA, 950 Glenn Drive, Suite 150, Folsom, CA 95630