



MEMBERSHIP APPLICATION/RENEWAL

FIRST Name _____ MIDDLE Initial _____ LAST Name _____
 ORGANIZATION (if applicable) _____
 STREET ADDRESS _____
 CITY _____ STATE/PROVINCE _____ ZIP/POSTAL CODE _____
 E-MAIL _____
 WORK TELEPHONE _____ HOME TELEPHONE _____
 DATE OF BIRTH ____/____/____ IDA MEMBER # (if renewal) _____

SELECT YOUR MEMBERSHIP CATEGORY

- | | |
|--|---|
| <input type="checkbox"/> Parent - \$45 (Parent or guardian of individual with dyslexia or other language based learning difference) | <input type="checkbox"/> Student - \$60 (Students preparing for careers in education) |
| <input type="checkbox"/> Advocate - \$80 (Individual with dyslexia or general supporter) | <input type="checkbox"/> Educational Institution - \$395 (Nonprofit organizations) |
| <input type="checkbox"/> Professional - \$95 (Professional in field with ability to apply for service provider listing on IDA Website) | <input type="checkbox"/> Corporate/Business - \$495 |
| <input type="checkbox"/> Senior/Retired - \$60 (Former educational/LD professionals) | <input type="checkbox"/> Lifetime - \$2,500 |

SELECT YOUR CONNECTION TO DYSLEXIA (Choose ONE)

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Academic Language Therapist | <input type="checkbox"/> Education/Administrator | <input type="checkbox"/> Educational Diagnostician | <input type="checkbox"/> Researcher/Education |
| <input type="checkbox"/> Advocate | <input type="checkbox"/> Education/Teacher (K-12) | <input type="checkbox"/> Parent | <input type="checkbox"/> Researcher/Medical |
| <input type="checkbox"/> Attorney | <input type="checkbox"/> Education/Teacher (Special Ed.) | <input type="checkbox"/> Physician | <input type="checkbox"/> Speech-Language Pathologist |
| <input type="checkbox"/> College Student | <input type="checkbox"/> Education/Teacher (Post Sec.) | <input type="checkbox"/> Psychiatrist | <input type="checkbox"/> Tutor/Certified or Trainee |
| <input type="checkbox"/> Corporation/Organization | | <input type="checkbox"/> Psychologist | <input type="checkbox"/> Other: _____ |
| | | <input type="checkbox"/> Reading Specialist | |

HOW DID YOU HEAR ABOUT IDA? (Choose ONE)

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> From my local IDA Branch | <input type="checkbox"/> Another parent/guardian | <input type="checkbox"/> Education professional | <input type="checkbox"/> Newspaper or magazine article |
| <input type="checkbox"/> Poster tear off information sheet | <input type="checkbox"/> IDA advertisement | <input type="checkbox"/> Physician or medical professional | <input type="checkbox"/> TV or radio |
| <input type="checkbox"/> IDA website | <input type="checkbox"/> IDA press release | <input type="checkbox"/> Friend or family | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Internet | <input type="checkbox"/> Teacher | | |
| | <input type="checkbox"/> Guidance counselor | | |

CONTINUED SUPPORT

Please consider providing additional support to IDA in the following areas:

- | | |
|---|----------|
| <input type="checkbox"/> IDA's Student Scholarship Fund | \$ _____ |
| <input type="checkbox"/> Teacher Training Programs | \$ _____ |
| <input type="checkbox"/> General Programs & Services | \$ _____ |

PAYMENT

- Check Enclosed (Make payable to: IDA)
 Purchase Order Enclosed (PO # _____)
 Credit Card Visa MasterCard AMEX Discover

TOTAL ENCLOSED \$ _____
 Today's Date _____

Name _____
 Signature _____

Acct # _____
 Expiration Date _____



MEMBERSHIP APPLICATION/RENEWAL

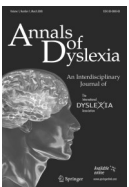
IDA MEMBERSHIP

The International Dyslexia Association (IDA) is an international organization that concerns itself with the complex issues of dyslexia. IDA membership includes of a variety of professionals in partnership with people with dyslexia and their families and all others interested in our mission.

The purpose of IDA is to pursue and provide the most comprehensive range of information and services that address the full scope of dyslexia and related difficulties in learning to read and write...*in a way that creates hope, possibility, and partnership.*

MEMBERSHIP BENEFITS

Membership in IDA brings you many unique opportunities to advance your network, knowledge base, and/or profession as well as interaction with peers and colleagues in the Learning Difference community. We equip you with the latest dyslexia research, developments in the field and best-practices. Additional benefits vary among category (please go to www.interdys.org for specifics). Basic Membership benefits include:

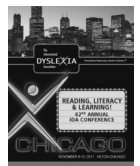


Annals of Dyslexia

IDA's semi-annual interdisciplinary, peer-reviewed journal dedicated to the scientific study of dyslexia and related language disabilities.

Member Discounts at National Conferences

Enjoy Members-only registration discounts when attending IDA's annual national conference.

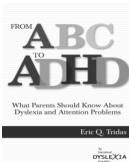


Perspectives on Language And Literacy

IDA's quarterly publication discusses educational best-practices, curriculum methods, case studies and first-person application of multisensory structured language techniques. *(Print & Online)*

Professional Referral For Service Database

IDA Professional members may opt for a contact listing as a Service Provider in the national IDA *Referral For Services* database.



IDA Publication Discounts

Enjoy members-only pricing discounts on IDA publications and other items purchased in the IDA online bookstore.

Special Rates on Professional Liability Insurance

IDA members receive special rates on independent, professional liability insurance through EducatorProtect.



The Journal of Reading & Writing

The Interdisciplinary Journal with scientific articles pertaining to the processes, acquisition, and loss of reading and writing skills.

Travel Discounts

Special savings and services including discounted rates on business and leisure vehicle rentals through Avis.



Insurance Discounts

Access to low group rates for IDA members on Liberty Mutual auto, home and selected other insurance products.

