

# INTERNATIONAL LITERACY ASSOCIATION

*Guam Council*  
P.O. Box 21733  
G.M.F., Guam 96921  
<http://ilaguam.blogspot.com>  
[iraguam@gmail.com](mailto:iraguam@gmail.com)

## MEMBERSHIP APPLICATION

**PRINT ALL INFORMATION CLEARLY:**

FY 20\_\_\_\_-20\_\_\_\_

Last Name: \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

\_\_\_\_\_ Work Phone: \_\_\_\_\_

School/Work Location: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_

Grade(s)/Subject: \_\_\_\_\_ E mail: \_\_\_\_\_

NATIONAL MEMBERSHIP #: \_\_\_\_\_ EXP DATE: \_\_\_\_\_

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Statement of Receipt:

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