

Oklahoma Reading Association Membership Form

Date _____ *Remit only ORA dues to: Dawn Everett, #8 Creekwood Springs, Woodward, OK 73801*

Name (Last, First) _____ ORA Membership: New _____ Renewal _____

Mailing Address _____ IRA Membership: Yes _____ No _____

City _____ State: OK Zip _____ IRA # _____ Expires _____

Telephone: (home) () _____ Fax: () _____

(work) () _____ E-mail: _____

District _____ School _____

Position: (Please Circle): Classroom Teacher: K-5, 6-12, Administrator, Reading Specialist, Media Specialist,
Learning Disabilities, ESL, Professor, Student, Other _____

Are you a member of your local council? YES or NO Name of council _____

ORA DUES: \$20.00 Local Council Dues \$ _____ Check _____ Cash _____

College Student Dues: \$5.00 _____ Name of Higher Ed. Institution _____