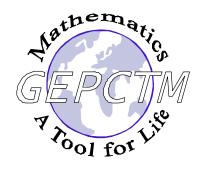


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2008 – 2009 Membership Form Membership Valid August 1, 2008 – July 31, 2009

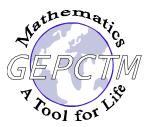


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School Address:			
City:		e:	Zip:
Home Phor	ome Phone: School/Other Phone:		:
E-mail:			
Position: Teacher Administrator Consultant Retired Other:			
Type of School: Elementary Middle High K-8 K-12 University			
If UIL Coach, check which: \square Number Sense \square Calculator \square Mathematics			
GEPCTM	•	.00 PAID DATE:	·
To better serve your needs, please comment below as to any topics or training that would interest you. GEPCTM will try to address these needs through the Dinner Meetings and the future Fall Conferences.			

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