



Membership Form

member:
 New Renew \$ 20.00

Optional:

MAGE (Michigan Alliance for Gifted Ed.):
 \$20 annual family membership \$ _____
 Tax-deductible donation \$ _____
 Total enclosed \$ _____

Please list all family members

Adult Names: _____
First Last

Child(ren):

Name	Age	School attending:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Use reverse side to list additional children.

Mailing address:

Phone number: _____

E-mail (Please print clearly):

Note: GT Resource Network will not share your e-mail address with any other organization.

Make check payable to: GT Resource Network.
 Return with payment to: PO Box 68724
 Grand Rapids MI 49516

Thank you!

PO Box 68724
 Grand Rapids MI 49516
 (616) 526-5878
www.GTResourceNetwork.org
info@GTResourceNetwork.org