



**October
Membership Promotion
15 Months for the Price of 12**



Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone - Work: _____ Phone - Home: _____
 Phone-Fax: _____ County: _____
 E-mail: _____ District: _____
 Referred by: _____ School: _____

Choose one:

- I am applying for a new membership.
- I wish to renew my membership #

Check all that apply:

- Administrator
- Teacher
- Parent
- Grandparent
- GATE Coordinator
- Consultant
- Counselor/Psychologist
- School Board Member

Select membership option:

- International Addresses ~ Add \$15 per year to each category
- One Year (15 months)**
- Individual \$75
 - Family \$85
 - Institutional \$100

Special skills/interests:

- Advocacy
- Math
- Art/Music
- Science
- Language Arts
- Technology

CAG is active in lobbying efforts to promote appropriate education for gifted and talented students and assigns \$5.00 of each membership to CAG/PAC, CAG's Political Action Committee. Dues payments are not tax deductible as charitable contributions for federal income tax purposes.

California Foundation for Gifted Education was formed in July of 2006 to make a positive difference in the lives of gifted children and youth by generating funds to support research and development, scholarships, and gifted education projects. Please consider making a tax-deductible donation.

I also wish to make a tax-deductible contribution in the amount of \$ _____ to the California Foundation for Gifted Education.

Payment method:

Personal/District Office Check # _____ Purchase Order # _____
(Copy of purchase order must be attached.)

Credit Card Payment:

Card Number: _____ Expiration Date: _____
 Name on Credit Card _____ Security Code: _____
 Signature: _____

Mail completed form to CAG Membership, 9278 Madison Avenue, Orangevale, CA 95662 or fax it to 916-988-5999. Payment must accompany membership application. Questions? Call 916-988-3999.