

**MEMBERSHIP APPLICATION FORM** (July 1, 2021– June 30, 2022)

New Member       Renewing Member      Date of application \_\_\_\_\_

**Contact Information**

Name \_\_\_\_\_  
Title                          First                          Middle                          Last

Has your name changed since last renewal? Please list former name: \_\_\_\_\_

Address \_\_\_\_\_  
Street    City    State    Zip Code  
 This is a new address since last renewal

Phone \_\_\_\_\_  
Cell    Home    Work

Preferred E-mail Address \_\_\_\_\_  
 This is a new email address since last renewal

**School Information**     No changes since last renewal

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Name of World Languages Supervisor \_\_\_\_\_  
 Classes/ Levels of Italian Offered \_\_\_\_\_ Which Do You Teach? \_\_\_\_\_  
 Approximate Enrollment in the Italian Program \_\_\_\_\_

**Membership Category**     Individual \$35       Full time Student \$10       Retired \$10       Supporting \$25

Institutional \$120 (For schools with up to 4 members, beyond 4 an additional \$30 per member) A separate membership application for each member should be included with payment       Please accept my donation in the amount of \$ \_\_\_\_\_

**Method of Payment**     Check # \_\_\_\_\_     Paypal last name on account \_\_\_\_\_     Purchase Order

**Tell Us About Yourself**

**I am interested in:**

- \_\_\_\_ Professional Development Workshops
- \_\_\_\_ Activities/Contests for my students
- \_\_\_\_ Study Abroad Scholarships for Teachers
- \_\_\_\_ Corsi di Aggiornamento di Lingua
- \_\_\_\_ Support/ Mentoring
- \_\_\_\_ Methodology Workshops
- \_\_\_\_ Information for AP Teachers
- \_\_\_\_ Teaching Resources
- \_\_\_\_ Job Postings
- \_\_\_\_ Advocacy

**Committees**

- Are you interested in serving on one or more of committees?  
 Yes     Not at this time    (Check all that apply)
- \_\_\_\_ Publicity
  - \_\_\_\_ Membership
  - \_\_\_\_ Networking
  - \_\_\_\_ Professional Development
  - \_\_\_\_ Student Activities/Contests
  - \_\_\_\_ Scholarships
  - \_\_\_\_ Website
  - \_\_\_\_ Social Media/Blog

**Is there a specific teacher or colleague you suggest we contact about ITANJ membership?**

Teacher’s Name: \_\_\_\_\_ Email: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

**Please make checks payable to ITANJ**  
 Mail to:  
 Rosalie Romano, St. Peter’s Prep., 144 Grand St. Jersey City, NJ 07302NJ 07932  
 E-mail: [info@itani.org](mailto:info@itani.org) or Website: [www.itani.org](http://www.itani.org)