

D.L.A.M.C.

Doris L. Allen Minority Caucus

<http://dlamc.ohea.us/>

<http://dlamc.groupsie.com>

Membership Application

Please Print Legibly

Name _____ Date _____

Mailing Address _____

City, State, Zip _____

Phone (_____) _____

E-Mail Address _____

District Association _____ Local _____

Ethnic Group _____

Type of Membership:

Active (\$15 per year) Associate (\$10 per year) Student (\$3 per year)

ESP (\$10 per year) Retired (\$5 per year)

Please return your application and payment to:

Adrienne M. Bowden (DLAMC Vice-President)

**7219 Irish Rose Lane
Pickerington, Ohio 43147
(614) 619-0062**