



Grow ★ Learn ★ Support

Texas Statewide Network of Assessment Professionals

2017-2018 Membership Application

New Member

Renewing Member

SECTION 1: Member Contact Information

<input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss. <input type="checkbox"/> Ms.	
Name	
Title	
Organization/District	Region Service Center
Mailing Address	Telephone
City / State	Zip Code
Primary Email	

SECTION 2: Regional Group Membership: (check regional group/region #)

- | | | |
|-------------------------------------|---|--|
| <input type="checkbox"/> STATS (1) | <input type="checkbox"/> NETTS (8) | <input type="checkbox"/> WEST-TAP (15) |
| <input type="checkbox"/> C-BATS (2) | <input type="checkbox"/> TAP (9) | <input type="checkbox"/> TOT-RATS (16) |
| <input type="checkbox"/> CARATS (3) | <input type="checkbox"/> MATS-East (10) | <input type="checkbox"/> SPATS (17) |
| <input type="checkbox"/> BRATS (4) | <input type="checkbox"/> MATS-West (11) | <input type="checkbox"/> WRAPS (18) |
| <input type="checkbox"/> SETTS (5) | <input type="checkbox"/> HOTTS (12) | <input type="checkbox"/> DRATS (19) |
| <input type="checkbox"/> HATS (6) | <input type="checkbox"/> CATS (13) | <input type="checkbox"/> RATS (20) |
| <input type="checkbox"/> NEATS (7) | <input type="checkbox"/> FRATS (14) | |

Please submit annual membership dues of \$25.00 to the address below. Checks should be made out to TSNAP.

TSNAP
 P.O. Box 441741
 Houston, Texas 77244-1741

Treasurer: Thomas Negri (832)-444-3545

Email: tnegri@sbcglobal.net

Web Address: www.tsnap.org

TSNAP Use Only:

School Check # _____ Personal Check # _____ Cash _____