



# ILAVESNP

## Membership Form

*(please print)*

*Name:*

*Position:*

*School:*

*School phone:*

*Email address:*

*Mailing address:*

*Home phone:*

*Membership fee (Please Circle): \$70.00 full-time educator, \$20.00 instructional aide, or \$20.00 student*

*Membership: Renewal is on an annual basis. You may also join through the Illinois Association for Career and Technical Educators: [www.iacte.org](http://www.iacte.org).*

*I would like more information on:*

Please complete and mail with payment to:

KARVES  
Attn: Bosa Goodale  
4083 N 1000W Road  
Bourbonnais, IL 60914

For additional information:

<http://www.ilavesnp.net>  
or call  
Elizabeth Kaufman  
815-838-6941