

**North Suburban Speech Language Association
2008-2009 Membership Form**

Membership is open to SLPs, Audiologists and SLP Assistants. Please complete this membership form. You will not receive paper reminders in the mail regarding upcoming meetings, so please provide an e-mail address which you can access regularly to receive updates. If you provide a workplace address, please check with your technology coordinator that NSSLA e-mails (from huizangalj@aol.com) will not be blocked, or consider listing a different email.

Name: _____

Speech-Language Pathologist _____ Audiologist _____ SLP Assistant _____

Home Address: _____

Work Address: _____

Home Phone: _____ Work Phone: _____

E-mail Address (please print clearly!) _____

State License Number: _____

Social Security Number or ASHA Number: _____

Are you a...

member of ASHA? _____

member of ISHA? _____

former member of NSSLA? _____

Has your name, address, phone or email changed since last year? _____

Membership Dues - \$40 Payable to NSSLA

Please mail membership form and check to: Julie Gallo 2744 Summit Ave.
Highland Park, IL 60035

Non-SLPs or Audiologists are welcome to attend meetings for a \$30.00 fee per session.

If you have any questions regarding NSSLA, please contact Donna Torf, Co-President (donnatorf@yahoo.com) or go to nssla.org and click "Contact Us."