



R E L I G I O U S
E D U C A T I O N
A S S O C I A T I O N

2010 Membership Form

Please make any necessary changes to your name and contact information below:



Telephone _____ Fax _____

Email _____

In 2010, REA dues will be determined using a sliding scale based on income. Your 2010 membership is based on a twelve-month schedule, beginning January 1 through December 31. As a benefit of membership, you will receive **FIVE** issues of *Religious Education*, the official journal of the REA!

Renew my membership for:

- \$35 – income < \$25,000
- \$60 – income from \$25,000 - \$39,999
- \$75 – income from \$40,000 - \$54,999
- \$85 – income from \$55,000 - \$64,999
- \$95 – income > \$65,000

I have also included a donation of:

- \$10 \$25 \$50 \$100
- Other \$ _____

Total Submitted: _____*

*Membership fee plus donation, if any

Payment Type: * Please make all payments in US funds.	Card # _____
<input type="checkbox"/> Check	Expiration _____
<input type="checkbox"/> Money Order	CVV Security Code _____
<input type="checkbox"/> Credit Card	Phone# _____
	Signature _____

Citizenship	Ethnic Origin/Identification (check all that apply)
<input type="checkbox"/> U.S.A.	<input type="checkbox"/> African <input type="checkbox"/> Asian <input type="checkbox"/> Latino(a)/Hispanic <input type="checkbox"/> Indigenous <input type="checkbox"/> European <input type="checkbox"/> Other
<input type="checkbox"/> Outside U.S.A. Specify Nation: _____	<input type="checkbox"/> African <input type="checkbox"/> Asian <input type="checkbox"/> Latino(a)/Hispanic <input type="checkbox"/> Indigenous <input type="checkbox"/> European <input type="checkbox"/> Other

Major Faith Identification: Christian Jewish Muslim Buddhist Hindu Indigenous

Denomination: _____

Occupation: _____ Full-time Part-time Volunteer Other

Institutional Affiliation: _____

Seminary Undergraduate Education Research University Secondary/High School Education

Ecclesial Institution Other _____