AMICI, Classical Association of Iowa

2009-10 MEMBERSHIP FORM

Name: ________________________________

Home address: ________________________
___________________________________
___________________________________

School address: ______________________
___________________________________
___________________________________

Home Telephone: _____________________
School Telephone ____________________

E-mail: _____________________________
FAX: ______________________________

Preferred mailing address: Home ___
School ___

Subjects Taught: ______________________

Enrollment
First year Latin ___
Second year Latin ___
Third year Latin ___
Fourth year Latin ___
Other classes:

Volunteer
Would you be willing to speak to local high schools, civic groups, etc.? Yes No

If yes, what topic(s) or titles would you be willing to speak on?

Would you be willing to speak with teachers, counselors, principals, school boards, PTAs, etc. about the value of Latin in the curriculum?

If you know of anyone else not on our mailing list and would benefit from receiving a copy of our newsletter, please send the person’s name and address (on back).

Please return the form with check for $5.00 (payable to AMICI) to:

John Gruber-Miller
AMICI Secretary-Treasurer
Department of Classical and Modern Languages
Cornell College
600 1st Street West
Mount Vernon, IA 52314