



Texas Irlen Association

New _____ Renewal _____

APPLICATION FOR MEMBERSHIP
Membership Year: **current date until December 31, 2023**

Please Print or Type

Name _____

Address _____

City, State, Zip _____

Home #	Work #	Fax #	Email
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Employed by	Job Position
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Check Your Category	Dues	Qualifications
_____ Member	\$50.00	Certified Irlen Diagnostician
_____ Member	\$50.00	Certified Irlen Screener

Trained/Recert by _____ Date _____ Certification Expiration Date _____

\$ 50 Total Submitted (Make check payable to Texas Irlen Association/Membership)

I certify that the above information is accurate.

Signature Date

YES I want my information on the TIA Website. **NO** I do not want my information on the Website.

IF YES Listed: City _____ Phone number _____ Email _____

Members can pay their dues via PayPal:
<http://www.texasirrlenassociation.org/membership.html>

Or mail payment to:
Texas Irlen Association
14215 Orion Drive, Tomball, TX 77375
(281) 636 9610

Questions: texasirrlen@gmail.com