



MEMBERSHIP FORM

GO SSLP membership year is from August 1 - July 31

Type	Membership Year	Fee (circle one)
New Member/Renewal	August 2018 - July 2019	\$35
New Member/Renewal	August 2018 - July 2020	\$70

OR Renew your membership online at www.gosslp.org.

Full Name: _____

Check if name change & list previous name: _____

School System: _____ Position (SLP, Supervisor, etc.): _____

Work Facility name: _____

Certification (Check all that apply): GA Teaching Certificate - SLP CCC GA License - SLP

Preferred Mailing Address: Home Work

Street: _____

City: _____ State: _____ Zip: _____

Email: Please list both email addresses and check the one you prefer we use.

Home: _____ Work: _____

Preferred Phone: Home Cell Work

Phone: _____ Fax: _____

PAYMENT INFORMATION

CHECK (payable to "GO SSLP")

If your school/system requires an invoice, please register online at www.gosslp.org and choose the "Pay Later" payment option. Then, print your invoice and submit it to your accounting department.

CREDIT CARD payments are accepted online at www.gosslp.org.

If you have questions about your membership, please contact GO SSLP at (404) 299-7700 or richard@associationstrategygroup.us

RETURN BY MAIL TO: GO SSLP Executive Office, 2700 Cumberland Pkwy, Ste 570, Atlanta, GA 30339

RETURN BY FAX TO: (404) 299-7029