



## Application for GLEAMS Membership

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Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Phone (work) \_\_\_\_\_

Phone (home) \_\_\_\_\_

School/Organization \_\_\_\_\_

Grade/Subject taught \_\_\_\_\_

New member \_\_\_\_\_ Renewal \_\_\_\_\_

Please make checks payable to GLEAMS and  
mail to:

GLEAMS Membership  
c/o Lori Kramer  
628 Sandbridge Circle E  
Worthington, OH 43085

I wish to become a member of GLEAMS in  
following category:

- \_\_\_\_\_ \$10 Active
- \_\_\_\_\_ \$5 Student
- \_\_\_\_\_ \$15 Institutional (non-profit)
- \_\_\_\_\_ \$25 Associate/Supporting
- \_\_\_\_\_ \$50 Institutional (corporate)

## GLEAMS

Great Lakes Educators of Aquatic & Marine Science  
628 Sandbridge Circle E  
Worthington, OH 43085