



Application for GLEAMS Membership

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