2021-22
Membership Form
Society of Professors of Education

Name ____________________________
Institutional Address ____________________________
________________________________________________
City ___________ State ______ Zip _________
Mailing Address ____________________________
________________________________________________
City ___________ State ______ Zip _________
Office Phone ____________________________
Fax ____________________________
Email ____________________________

SPE Website: https://societyofprofessorsofeducation.wordpress.com
www.societyofprofessorsofeducation.com

Dues
Membership Categories
1 yr. 2 yr.
2021 2021-22
(Check Correct Amount)
Institutional□ $75.00 □ $140.00
Regular □ $50.00 □ $90.00
Student □ $15.00 □ $25.00
Retired □ $25.00 □ $45.00

If you choose to pay thru PayPal --complete this form. Submit it electronically and you will be invoiced to your email.

Please Mail/Email To:
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Carrollton, GA 30118
(o) 678.839.6132
E-Mail: rmorris@westga.edu