

American Bridge Teachers' Association

Membership Application

Name: _____
(Please Print) (First) (MI) (Last)

Address: _____

City: _____ State: _____

Zip/Postal PLUS 4 (9 digits): _____ - _____

Province: _____ Country: _____

Telephone Number: (_____) _____

EMAIL Address: _____

*Please print your EMAIL **clearly!***

Check here if you **DO NOT** WANT to share your contact information with fellow ABTA members in our roster and Quarterly Magazine.

Check here if you **DO NOT** WANT to have your email address published on our website so potential students can contact you.

A. How long have you taught Bridge professionally?

_____ None (New) _____ 25 hours;

_____ 50 hours; _____ 100 hours or more; or

_____ I am not a teacher but I wish to be affiliated with a professional organization which promotes improvement in the teaching of bridge

B. I teach _____ (beginners), _____ (intermediates),
_____ (advanced) students. (Please check as many as apply)

C. I have taught in the following settings: _____ Home;
_____ School; _____ Community Center, _____ Bridge Clubs, _____ Other

D. Comments regarding my Bridge and Bridge teaching experience:

Signature:

***Dues: US Funds \$35 for 1 year; \$90 for 3 years;
or \$49/year for household***

***Canadian members may pay in Canadian funds by sending \$45 per year;
3 years for \$115; or \$62 per year for a household membership.
ABTA offers this option as a convenience to Canadians and fees may be
higher than the conversion rate indicates due to US bank fees.***

Household membership: \$49 per year US or \$62 Canadian

Please print this page and mail the completed application with
your check or money order to:

**Deborah Murphy, ABTA Business Secretary
1254 26th Avenue, San Francisco, CA 94122-1505**