



Association of Christian Teachers and Schools

911 S. Parsons Ave., Suite G

Brandon, FL 33511

Phone: (813) 684-2024

www.actsschools.org

Individual Membership Application

Date: Click or tap here to enter text. _____

Name: Click or tap here to enter text. _____

Address: _____

City _____ State: _____ Zip: _____

Telephone: _____ Email: _____

School Name: _____

Employment (circle one): Public Schools Christian Schools Retired

Degree (circle all that apply): AA BA BS MS MA Ph.D.

Signature: _____ Date: _____

**\$25.00 annual membership dues are valid from September 1 to August 31.
Please make check payable to ACTS and mail with application to the address above.**

**PLEASE NOTE: This application is for individual membership ONLY. If you are
looking for Teacher/Administrator certification, please use the certification
application. Contact our office with questions.**

Office use only:

Date: _____	Check #: _____	Amount: _____
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