

**BALANCED READING INSTRUCTION
SPECIAL INTEREST GROUP
MEMBERSHIP FORM
2005-2006**

Title _____ First Name _____ MI ___ Last Name _____

Mailing Address _____

City _____ State _____ Zip _____ Country _____

Home Phone _____ FAX _____

Institution _____

E-Mail (please print clearly): _____

• **My Research/Teaching Interests:**

1. _____
2. _____
3. _____

• **BRI Membership.** I'm currently:

- _____ a returning member of the BRI SIG
_____ a new member of the BRI SIG

• **IRA Membership.** I'm currently

- _____ a returning member of the International Reading Association
_____ a new member of the International Reading Association
IRA Membership #: _____

• **Service to BRI.** I'm interested in:

- _____ submitting a manuscript to the BRI Journal ___ Yes ___ Maybe ___ No
_____ serving on the Journal's Editorial Review Board ___ Yes ___ Maybe ___ No
-

**SEND THIS MEMBERSHIP FORM WITH A \$20.00 CHECK TO:
(Payable to Balanced Reading Instruction-SIG)**

Dr. Terri Tribbe Socol, BRI SIG Treasurer
School of Education and Allied Professions
Department of Teacher Education
400E McGuffey Hall
Oxford, Ohio 45056
E-mail: tribbetm@muohio.edu