

**American Educational Research Association
Instructional Technology - Special Interest Group (SIG-IT)**

Please include my name as a member of the Special Interest Group for Instructional Technology (SIG-IT) of the American Educational Research Association (AERA). I attach dues for the following period of membership (check one):

Regular Membership: ___ 1 year (\$10) ___ 2 years (\$20) ___ 3 years (\$30) ___ 4 years (\$40)

Student Membership: ___ 1 year (\$7) ___ 2 years (\$14)

[Please note: membership is calculated from the date of the annual convention]

Membership Status (circle one): New Member - or - Renewal

AERA Member (circle one): Yes ---- No

Name: _____ **Title:** _____

Affiliation: _____

Address: _____

Phone: _____ **FAX:** _____

E-mail: _____

Specific areas of interest: _____

Please print out and mail this form to the treasurer along with a check payable to "SIG-IT."

Address to mail the application and check:

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