

2009 CHTEA Membership Invoice

Name _____

Job Title _____

Company/School _____

Home Address _____

Street/PO Box

City

State

Zip

Business Address _____

Street/PO Box

City

State

Zip

Business (____) _____

Business Fax (____) _____

Home (____) _____

Home Fax (____) _____

Mobile (____) _____

E-Mail Address School _____

E-Mail Address Home _____

Annual Membership Dues are \$25, **payable by January 1**. Please make checks out to CHTEA and send this form, with your payment, to our CHTEA Treasurer Valerie Mason.

Valerie Mason
Cape Fear Community College
401 N. Front Street
Wilmington NC 28401

E-mail: vmason@cfcc.edu

Phone: 910-362-7333