

**ASSOCIATION FOR DIRECT INSTRUCTION
WISCONSIN CHAPTER
MEMBERSHIP FORM**

Please print legibly

Name _____ Phone () _____

Email Address _____

Home Address

Employer/Affiliation _____ Phone () _____

Address _____

Are you already a member of the National Association for Direct Instruction? Yes No

If not, we encourage you to become a member of the Association for Direct Instruction - National Level.

Membership fee

ADI-WI \$10

Please make checks payable to ADI-WI

Submit to: Tami McGrattan, 794 Highway MM, Oregon, WI 53575

Do you have a success story about the use of DI in your school? May we contact you about including that information in an upcoming newsletter?

Yes, I have had success with: _____

