



# Electronic Membership Form

## Virginia Association for Adult and Continuing Education

**Welcome to VAACE! We received your membership dues via PayPal and need additional information to complete our member database. Please take a moment to fill out the information below and send it by e-mail to [bhill@cucps.k12.va.us](mailto:bhill@cucps.k12.va.us). Thank you.**

### Member Information

Name	
Address #1	
City	
State	
ZIP Code	
Telephone (home)	
Telephone (business)	
Fax	
E-Mail	
Position/Title	
Program/Organization Name	
Interest Group Highlight one: <ul style="list-style-type: none"> <li>• Public Schools and Literacy Affiliates</li> <li>• Adult Education Program Manager</li> <li>• Workforce and Continuing Education</li> <li>• ESOL</li> </ul>	