

We are happy to know of your interest in gifted education and are excited that you want to join the Utah Association for Gifted Children (UAGC) as an affiliate! Our Association works to promote awareness, foster understanding, provide a forum for exchange of ideas and information, and encourage adequate training of those who teach gifted students. To be submitted upon inception and updated at least yearly.

Application Date: _____

Name of Local Affiliate: _____

Mailing Address: _____

Phone: _____ Fax: _____

Email: _____ Website: _____

President: _____

Address: _____

Telephone: _____

Fax: _____

Email: _____

President Elect: _____

Address: _____

Telephone: _____

Fax: _____

Email: _____

Treasurer: _____

Address: _____

Telephone: _____

Fax: _____

Email: _____

Legislative Contact: _____

Address: _____

Telephone: _____

Email: _____

Other Officers: (Please attach additional pages if needed)

AFFILIATE SUVEY

Please complete the following in legible form on separate sheet.

To be submitted quarterly to UAGC Affiliate Director.

Name of person(s) completing survey:

What are the three most important things UAGC can do to assist you?

What issues are you most concerned about?

List the names/addresses of member from your organization who might be willing to be a resource for other affiliates.