



MUSIC TEACHERS NATIONAL ASSOCIATION

Teacher Specialist Application

Name _____ MTNA Member Number, if applicable _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Method of Evaluation: Specialist Projects College Faculty Documentation (college/university faculty)

Area of Teaching in Which Specialist Designation is Desired (circle one)

Recreational Music Making

Group Piano

Non-Refundable Application Fees

MTNA Members

Nonmembers

1st Teaching Area

\$75

\$125

Additional Teaching Area

\$50

\$100

Application Fees

\$ _____ Application Fee

\$ _____ Application Fee for each additional teaching area (if applicable)

\$ _____ Total Enclosed

Payment Method:

____ Check Enclosed (payable to MTNA)

____ Visa ____ MasterCard ____ American Express

Account Number _____ Expiration Date _____ Security Code _____ (3-4 digit code on front or back of credit card)

Signature _____

Billing Address Same As Above

Credit Card Billing Information (if different than above)

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Mail to: MTNA, 1 W. 4th St., Ste. 1550, Cincinnati, OH 45202