



Texas Regional Education Applicant Placement Program

Subscription Form

Yes! Sign up my district for Texas REAP. (The superintendent must be a current member of TASA in order for a district to subscribe.) Subscription period is a full year from date of receipt. Keep a copy of this form for your records. **Note:** *In order to fully activate your Texas REAP subscription, you must complete and submit to TASA both the Subscription Form and the Membership Form included in the Texas REAP packet.*

Contact Information

District Name: _____

Superintendent: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-Mail Address: _____

District Web Site: _____

How did you hear about TX REAP? _____

Subscription Fee

Select a subscription amount based on the number of students in your district.

- 0-499.....\$500 1,000-2,499\$600 10,000-24,999\$750
- 500-999.....\$550 2,500-9,999\$650 25,000 +\$900

Payment Information

___ **Check** in the amount of \$ _____, made payable to TASA

___ **Bill my district:** P.O.# _____ (P.O.# is required for TASA to bill your district)

___ **Credit Card:** American Express MasterCard Visa

Name on Card: _____

Card #: _____ Expiration Date: _____

Signature: _____ Date: _____

Superintendent's Signature _____

By signing below, _____ Independent School District agrees to pay for and participate in the Texas REAP program in compliance with standards, guidelines, requirements, and/or regulations established by the Texas Association of School Administrators or the National School Applications Network.

Signature: _____

Printed Name: _____ Superintendent

Please return completed Subscription Form along with your payment to:
TASA, 406 East 11th Street, Austin TX 78701-2617; fax 512-482-8658