



**Washington Learning Source Membership Form**  
 (For use by Washington State educational entities other than school districts)

NAME OF EDUCATIONAL INSTITUTION <i>University Prep</i>	ORGANIZATION TYPE: <input checked="" type="checkbox"/> PRIVATE SCHOOL - <i>Non profit</i> <input type="checkbox"/> STATE DEPT. OF EDUCATION <input type="checkbox"/> HIGHER EDUCATION INSTITUTION <input type="checkbox"/> NONPROFIT EDUCATIONAL ORGANIZATION
CONTACT PERSON <i>Anne Bingham</i>	CONTACT EMAIL <i>abingham@universityprep.org</i>
CONTACT PHONE <i>206 832 1121</i>	CONTACT FAX <i>206 525 9659</i>
MAILING ADDRESS LINE 1 <i>8000 25<sup>th</sup> Ave NE</i>	CITY STATE ZIP <i>Seattle WA 98115</i>
LOGIN: (FOR WLS PURPOSES ONLY) <i>abingham@universityprep.org</i>	PASSWORD (FOR WLS PURPOSES ONLY) <i>abingham</i>

On behalf of the agency specified herein, I, Superintendent and/or Chief Executive Officer of said agency, have reviewed and accepted:

*Erica L Hamlin*  
 Signature

*11/16/11*  
 Date Signed

~~Handwritten~~ *ERICA HAMLIN*  
 Printed Name

*HEAD OF SCHOOL*  
 Printed Title

*University Prep*  
 Agency Name

MAIL OR FAX YOUR COMPLETED FORM TO:  
 Anne Allen, Director  
 Washington Learning Source  
 Puget Sound ESD  
 800 Oakesdale Ave SW  
 Renton, WA 98057  
 (425) 917-7907 Fax

*Rec'd 11/16/11*