



Washington Learning Source Membership Form

(For use by Washington State educational entities other than school districts)

NAME OF EDUCATIONAL INSTITUTION <i>Clark College</i> <i>1933 Fort Vancouver Way</i> <i>Vancouver, WA 98663</i>	ORGANIZATION TYPE: <input type="checkbox"/> PRIVATE SCHOOL <input type="checkbox"/> STATE DEPT. OF EDUCATION <input checked="" type="checkbox"/> HIGHER EDUCATION INSTITUTION <input type="checkbox"/> NONPROFIT EDUCATIONAL ORGANIZATION
CONTACT PERSON <i>Lisa Nelson</i>	CONTACT EMAIL <i>lnelson@clark.edu</i>
CONTACT PHONE <i>(360) 992-2298</i>	CONTACT FAX <i>(360) 992-2875</i>
MAILING ADDRESS LINE 1 <i>1933 Fort Vancouver Way</i>	CITY STATE ZIP <i>Vancouver, WA 98663</i>
LOGIN: (FOR WLS PURPOSES ONLY) <i>lnelson@clark.edu</i>	PASSWORD (FOR WLS PURPOSES ONLY) <i>ClarkPenguins</i>

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

<i>Lisa Nelson</i>	<i>08/13/13</i>
Signature	Date Signed
<i>Lisa Nelson</i>	
Printed Name	
<i>Purchasing Mgr.</i>	<i>Clark College</i>
Printed Title	Agency Name

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