**NORTHWESTERN PENNSYLVANIA PSYCHOLOGICAL ASSOCIATION**

**2023 MEMBERSHIP APPLICATION**

New Member:  Y  N

Professional \_\_\_\_      Student \_\_\_\_

**DIRECTORY INFORMATION**

NOTE: Please print clearly and as you would like information to appear in the directory.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_      Degree \_\_\_\_\_\_\_\_\_\_\_\_\_

Licenses/Certifications \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Area(s) of Specialization\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone (office) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_      (home) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_     FAX \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate whether you would like to receive all correspondence via paper mail or email.

    \_\_\_\_\_\_\_ Send my correspondence via **email**.     \_\_\_\_\_\_\_ Send via **paper mail**.

Please **circle** whether you agree to having your information published.

* I  *do / do not* agree to have the above information included in the membership directory
* I  *do / do not* agree to have the above information included on the NWPPA website

(home phone #s will not be used on the website).

Directory information may be used for referrals or for mailings regarding professional opportunities.

**PLEASE MAIL THE COMPLETED APPLICATION WITH PAYMENT TO:**

**NWPPA**

**c/o Michael Bucell**

**12607 Forrest Drive**

**Edinboro, PA 16412**

**DUES OPTIONS**

\_\_\_\_   $55.00    PROFESSIONAL TWO YEAR MEMBERSHIP (Jan 2023 - Dec 2024)

\_\_\_\_   $30.00     Professional One Year Membership (Jan 2023- Dec 2023)

\_\_\_\_   $10.00     Student (Jan - Dec 2023)

**Checks** **should be made out to NWPPA**.    \_\_\_\_\_\_\_\_\_ Dues Amount

Additional Gift Contribution          \_\_\_\_\_\_\_\_\_ Contribution

                                $\_\_\_\_\_\_\_\_ **TOTAL Enclosed**