



**District of Columbia Speech-Language-Hearing Association
Membership Application (New and Re-New)**

2015

I am a: new member renewing member student (circle: undergraduate / graduate)

Name: _____ Date: _____

Address: _____

Home Phone: _____ Work Phone: _____

Email Address: (necessary as most communication is via email) _____

Place and City of Employment: _____

Job Title: (circle) SLP / A _____

Academic Degree(s): _____ Certification/Licensure: _____

DC License: Yes / No

Area(s) of Clinical Interest: _____

List your current committee/board assignment: _____

Contact Me about a committee / board assignment: Yes / No

I would like to participate on a DCSHA committee:

- Program/Conference Membership Honors Communications
- Interested, but do not know where I fit in (DCSHA will call you)

Have you visited www.dcscha.org during the past 12 months? yes no

PAYMENT

Enclose a check made out to DCSHA (address below) for 2015 membership dues with this form

NOTE: DUES represent an increase from 2013

___ \$50.00 Regular Membership 1 year

___ \$25.00-per year - Regular Membership for the Retired Professional

___ \$90.00 Regular Membership – 2 years

___ \$45.00 Joint Membership (specify MSHA/SHAV: _____) **send copy of membership card**

___ \$85.00 Joint Membership – for 2 years (specify MSHA/SHAV _____) **send copy of membership card**

___ \$35.00 Associate Membership

___ \$35.00 Student Membership (this rate is for a 2 year membership!)

New Membership Cards will be mailed – No online registration at this time

Please return this form with your membership dues (check or money order) to (cannot pay on line):

DCSHA PO Box 8362 Langley Park Hyattsville, MD 20787

Please refer to the membership types and corresponding dues below.

Note: Membership Dues have changed since 2013

Regular membership \$50.00
\$90.00 (two years 2015, 2016)

All regular members must hold at least a Master's degree or equivalent in the field of audiology and/or speech-language pathology or science. Elected and/or appointed offices shall be limited to Regular and/or Joint members. Regular members are part of the voting body.

Joint membership \$45.00/year (with proof of membership in MD or VA)
\$85.00/ 2 years

All joint members must hold at least a Master's degree or equivalent in the field of audiology and/or speech-language pathology or science. Joint members must also be an active member of the Maryland and/or Virginia state speech and hearing associations. Proof of membership is required. Elected and/or appointed offices shall be limited to regular or Joint members. Joint members are part of the voting body.

Retired Profession - \$25.00 per year – must be 65 years and older and no longer employed as a professional SLP/AUD

Associate Membership \$35.00/year

Associate members are those members who do not hold a Master's degree or equivalent in the field of audiology or speech-language pathology or science. Associate members shall not be part of the voting body. Associate members may not be elected or appointed to an office.

Student Membership \$35.00 – Good for 2 years

Student members are those members who are presently studying the field of audiology and/or speech-language pathology or science. Student members shall not be a part of the voting body. Student members may not be elected or appointed to an office. Student membership applies to undergraduate and graduate level students. Persons in their CFY year should apply for regular membership.

If you have any questions regarding membership or would like to become more involved with any DCSHA committee please contact:

DCSHAPRESIDENT @GMAIL.ORG

DCSHA Address - PO Box 8362 (Langley Park)

Hyattsville, MD 20787

On- Line Dues Renewal is not available at this time