



Membership Application / Renewal

WVCA is a branch of the American Counseling Association.

(Membership runs from the date you send in the application.)

Name: (last) _____ (first) _____ (m) _____

Mailing Address: _____ (city/state) _____ (zip) _____

Telephone: _____ E-mail: _____

Are you a member of: ACA _____ NBCC _____ Other _____

Are you a: (select all that apply)

- | | |
|---|---------------------------------------|
| _____ National Certified Counselor | _____ Licensed Professional Counselor |
| _____ National Certified School Counselor | _____ Licensed Social Worker |
| _____ Licensed School Psychologist | _____ Licensed Psychologist |
| _____ Professional Student Support Certificate for School Counselor | |
| _____ Other _____ | |

WVCA (check one) _____ ~Regular Membership \$60 (\$100 for 2 year membership)
 _____ ~Retired Membership (any voluntary contribution) \$ _____
 _____ ~All students \$10 (must have signature of professor)
 ~Professor Signature _____
 ~College _____

Division Memberships. To join a division, you must be a WVCA member.

Annual division dues are \$5 for each division (\$10 for a 2 year division membership):

_____ WV College Counselors Association (WVCCA)

Total Due \$ _____

MC / Visa # _____ Exp. Date _____ Signature/date _____

Or send check to: "WVCA" Marilyn Smith, 241 Muse St., Falling Waters, WV 25419