

Ventura County Psychological Association

Website: www.venturacountypsych.com

Membership Application

Last Name _____ First Name _____

- Check if information below is the same as last year's application (If same, just provide signature below)

Address _____

Phone number: work _____ home _____

Email address _____

Please check:

- Use my email address for VCPA/CPA business only
 You may include my email address in database for VCPA member promotional use.

Highest Degree _____ License Number _____

Graduate Institution _____

Employed by _____

- APA member?
 CPA member?
 National Registry?

Signature _____

Date _____

For complimentary online bio, complete and submit form located at
http://www.venturacountypsych.com/about_vcpa/newmembers.htm.

2009 ANNUAL DUES:

Full members: \$60

Association & Affiliate Members: \$50

Students enrolled in a doctoral or master's
program in psychology: \$15
(with copy of Student ID)

Please return completed application and
payment to:

VCPA Treasurer
141 Duesenberg Dr., Ste. 2
Thousand Oaks, CA 91362

New members please include a current copy of
your license.