

Send to: Pam Van Der Does, WCA Membership Services  
7631 W Idaho Street, Rathdrum, ID 83858  
Email [wcaexec@roadrunner.com](mailto:wcaexec@roadrunner.com) Phone 208.755.6121

**Membership Application and renewal form**  
(95% of dues is tax deductible)

- Professional/Associate, Basic (\$72)     Student/Retired, Basic (\$35)     Organizational (call for details)

Please choose a division (Basic Memberships only—not organizational)

- WASERVIC     WSACES     WAMCD     WAAOC     Mental Health     WCSJ     WCDA

Additional Division(s) (\$10.00 each, per yr)

- WASERVIC     WSACES     WAMCD     WAAOC     Mental Health     WCSJ     WCDA

**School Counselors Option:**

- WCA+WSCA, regular (\$86)**     **WCA+WSCA, student/retired (\$50)**  
 **I'm already a WSCA member. I want to join WCA for \$36 (\$25, student/retired)**

PAYMENT ENCLOSED (check or money order, payable to WCA in US funds)

CHARGE my     VISA     MC (\$3 surcharge for credit card processing)

Payment in full     Installment Option (does not apply for student/retired)

**1<sup>st</sup> check, \$24 + additional divisions (\$28.67 WSCA)**  
**2<sup>nd</sup> & 3<sup>rd</sup> checks postdated, \$24 each, consecutive months (\$28.67 WSCA)**

Card # \_\_\_\_\_ Exp. \_\_\_\_\_ Signature \_\_\_\_\_

Name on Card \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Preferred  Home  Work  Other \_\_\_\_\_

Highest degree earned \_\_\_\_\_ Date \_\_\_\_\_ Specialty \_\_\_\_\_

**STUDENT VERIFICATION**  
(required for all student members)

College/University \_\_\_\_\_ Professor's Signature \_\_\_\_\_

- Send membership directory (electronic download)