

Vermont School Counselor Association  
 PMB 301 150 Dorset Street  
 South Burlington, VT 05403-6275  
**2010 MEMBERSHIP REGISTRATION**

NAME: \_\_\_\_\_



RENEWAL



NEW MEMBER

HOME INFORMATION: Street/PO Box: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Fax: \_\_\_\_\_

WORK INFORMATION:

School Name: \_\_\_\_\_

Street: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Fax: \_\_\_\_\_

PREFERRED MAILING ADDRESS:

Home

Work

MY CURRENT PROFESSIONAL EMPLOYMENT IS:

*(check all that apply)*

High School Counselor

Vocational Counselor

Elementary Counselor

Career & Technical Counselor Coordinator

Middle School Counselor

Private Practice Counselor

College Counselor

Mental Health Counselor

Student Assistance Counselor

Substance Abuse Counselor

Mental Health Clinician in the school

Other \_\_\_\_\_

VSAC Counselor

**Membership Fees for VTSCA**

1<sup>st</sup> year Licensed School Counselor (FREE) \$ 00.00

Licensed School Counselor (\$45.00) \$ \_\_\_\_\_

Affiliate Counselor (\$45.00) \$ \_\_\_\_\_

Student (\$25.00) \$ \_\_\_\_\_

Retired School Counselor (\$25.00) \$ \_\_\_\_\_

Non-VTSCA Member (\$80.00) \$ \_\_\_\_\_

Non-VTSCA Student/Retiree (\$35.00) \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

Payment Type Enclosed

Check # \_\_\_\_\_ Amount \$ \_\_\_\_\_ Purchase Order # \_\_\_\_\_ Amount \$ \_\_\_\_\_

Are you a member of the American School Counselor Association (ASCA)? \_\_\_\_\_

Are you a member of VT-NEA? \_\_\_\_\_