

Renewal
 New Member

Arizona Speech-Language-Hearing Association 2009/2010 Membership Application

ArSHA Year: October 1, 2009 to September 30, 2010

PLEASE RETURN THIS FORM WITH PAYMENT TO: ArSHA, P.O. Box 12334, Tempe, AZ 85284
 All ArSHA newsletters & directories will be placed on the ArSHA member's only section of the website.

Name: _____ **Date:** _____
[Please place an X in the box beside any new and/or updated information]

Previous Name/Maiden Name: _____

Home: _____
 Street Address _____ City _____ State _____ ZIP _____

Company Name: _____

Work: _____
 Street Address _____ City _____ State _____ ZIP _____

Home Phone: _____ **Work/Cell:** _____

Email: _____ **Preferred Mailing Address:** Home Work

Highest Degree: _____ **CCC-SLP** __ **CFY-SLP** __ **CCC-A** __ **CFY-A** __

State License #: _____ **ASHA ID #:** _____

MEMBERSHIP DUES

Please select one of the following: (see back for membership category descriptions)

ACTIVE	\$100.00	_____
LIFE	\$ 0.00	_____
AFFILIATE	\$75.00	_____
ASSOCIATE	\$60.00	_____
STUDENT	\$30.00	_____

AMOUNT ENCLOSED:

Dues _____ \$ _____

Late Fee (if postmarked after 10/31/2009) \$ **\$20.00**

Legislative Fund Contribution \$ _____

General Fund Contribution \$ _____

Total Amount enclosed: \$ _____

** \$25.00 returned check fee

AREA OF SPECIALTY (please mark areas that apply to you or your professional setting)
There is no agreement, understanding, or endorsement between you and ArSHA regarding your expertise in the specialty(s) that you have chosen on this form. In no way is ArSHA specifying that you are an expert in the fields you have chosen nor does ArSHA take legal responsibility for your knowledge in the specialty fields you have chosen.

SPEECH-LANGUAGE THERAPY

Total Communication _____
 Augmentative Communication _____
 Cognitive Disorder _____
 Myofunctional _____
 Dysphagia _____
 Aphasia _____
 Apraxia _____
 Head Trauma _____
 Aural Rehabilitation _____
 Accent Reduction _____
 Autism _____
 Early Intervention _____
 Voice _____
 Fluency _____
 Articulation _____
 Oral Motor _____
 Other _____

AUDIOLOGY

Evoked Response Evaluations _____
 Central Auditory Processing _____
 Newborn Screenings _____
 Industrial Screenings _____
 Sound Survey _____
 Otoacoustic Emissions _____
 Assistive Devices _____
 Cochlear Implants _____
 Hearing Aid Evals/Referrals _____
 Hearing Aid Dispensing _____
 ENG _____

Audiologists and SLP's:

Geriatric/Adult _____
 School Aged _____
 Infant/Toddler/Preschool _____
 Multi-Handicapped _____
 Sign Language _____
 Bilingual _____ (Lang: _____)

WEBSITE REFERRAL SECTION:
 I agree to allow ArSHA to place my name, work #, and email address on the ArSHA website for the "Find an SLP/AUD" section. (if you do not agree please do not sign)
 Signature: _____

We encourage all members to be involved in ArSHA. If you wish to participate and/or serve as chairperson of a committee, please circle:

Audiology Council	Continuing Ed.
Early Childhood	Medical SLP
Multicultural Programs	Private Practice
Public Schools	Public Relations
Honors	Website

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MEMBERSHIP CATEGORIES

Voting Members:

ACTIVE members shall possess, as minimal requirements, a Masters Degree or equivalent with a major emphasis in Speech Pathology, Audiology, Speech & Hearing Science or research of human communication.

LIFE membership will be awarded to any Active Member who has attained the age of 65. All privileges of an Active Member will be granted to Life Members without payment of annual dues.

Non-Voting Members:

AFFILIATE members shall be those persons who are ineligible for Active Membership or Student Membership, but who hold the Bachelor's degree with a major field of Speech-Language Pathology, Audiology, or Speech and Hearing Science.

ASSOCIATE membership is awarded to those persons who hold a degree in a field related to human communication, but who are ineligible for Active Membership, Student Membership or Affiliate Membership.

STUDENT membership shall be granted to those persons who are enrolled as Full-time and part-time undergraduate and graduate students in an accredited college or university degree program and who are recognized by that institution as majors in Speech-Language Pathology, Communication Disorders, Audiology or Speech and Hearing Science. Full-time doctoral students in an accredited college or university degree program and who are recognized by that institution as a student in Speech-Language Pathology, Communication Disorders, Audiology or Speech and Hearing Science.

Benefits of being an ArSHA member:

- **New Members Only Section on the Website**
- **Annual Membership Directory**
- **Annual ArSHA Convention**
- **ArSHA sponsored workshops and clinics**
- **Town Hall Meetings**
- **Quarterly Online Newsletters**
- **Awards and Honors**