

## APA New Member

Welcome to APA! We are excited to get to know you and hope you will plan on attending a conference soon. Please send the New Member form and \$25 dues to your regional treasurer.

Name

Employer

Office Address

City

State

ZIP

Office Email

Office Phone

Position Title

I prefer to use my

Office Email/Phone

Home Email/Phone

APA Region

Birthday

Date of latest PC(USA) Polity class taken: If unknown please contact your Regional Certification Chair

Currently working on:

What year did you join APA?

Home Address

City

State

Zip

Home Email

Cell/Home Phone

For Statistical Purposes Only:

Age Range   ☐ 25 & under   ☐ 26-45   ☐ 46-55   ☐ 56-65   ☐ Over 66

Race:

Gender:

Are you Disabled?      Please list type of disability

Are you a member of a PC(USA) Congregation?

Are you an Ordained Elder?

If no, please list your denomination