# Pass this on to a colleague to join MNSHA!



**Member Information** 

## Minnesota Speech-Language-Hearing Association

700 McKnight Park Drive, Suite 708, Pittsburgh, PA 15237 Website: www.MNSHA.org • Email: office@MNSHA.org • Phone: 855-727-2836

# MEMBERSHIP APPLICATION

Membership Year: October 1 - September 30

Name:	Credentials:			
Pronouns:				
Address:				
☐ Work Address ☐ Home Address				
	State: Zip:			
	Cell #:			
Email:				
☐ Check here if you want your information omitted from labels sold for CEU offerings and profession-related opportunities.				
☐ Include my information in the MNSHA Online Member Directory.				
Residing County:				
Employer:				
Position:				
, , , ,	al and multilingual practitioners. If you would like to be additional languages with which you communicate.			
☐ Check if you are in need of any ADA Accommodations for committee meetings and/or professional development opportunities. In addition, please notify the MNSHA Office of your request.				
MN License (check all that apply):				
☐ MN Board of Teaching L	icensure			
<b>Highest Degree Earned:</b> □ Bachelor	☐ Master ☐ Doctoral			
Memberships and Certifica	tions			
☐ ASHA Member ☐ CCC-A	UD CCC-SLP			
Ages Served	Volunteer Interest			
☐ All Ages ☐ Newborn ☐ Prescho☐ School Age ☐ Adult ☐ Geriatric	telepte lie Velupteer enperturities meu			

#### Membership Eligibility and Dues

Please check membership category.

MNSHA membership dues are not deductible as a charitable contribution for U.S. federal income

tax purposes, but may be deductible as a business expense. MNSHA estimates that 41% of your dues are not deductible due to MNSHA's lobbying activities on behalf of its members.

Membership Type	One Year	Two Year
Regular Member	□ \$99	□ \$178
Associate Member	□ \$80	□ \$144
Affiliate Member	□ \$50	□ \$90
Student Member	□ \$20	□ \$36
Recent Graduate Member		□ \$99
Life Member	□ \$30	□ \$54
Associate Life Member	□ \$30	□ \$54

Please see www.MNSHA.org for an explanation of member categories as well as eligibility requirements for group and organizational memberships.

Referral	
Membership Referred By:	

our interests and	
opportunities may	Payment Ontions

Payment Options			
<b>Join Online</b> - Visit <u>www.MNSHA.org</u> and log in to your account to pay online with a credit card.			
Mail/Fax - Complete this form and mail/fax it to the MNSHA Office with your method of payment.			
☐ Check (payable to MNSHA) ☐ Visa ☐ MasterCard ☐ Discover ☐ American Express			
<u>x</u>			
SIGNATURE			
CREDIT CARD ACCOUNT NUMBER			
EXPIRATION DATE			

### Listservs

Retired

Other

**Work Setting** 

☐ College/University

☐ Federal or State Agency

☐ ENT/Medical Practice

☐ Center/Clinic

☐ Hospital/Rehab

☐ Private Practice

☐ Long-Term Care

☐ School

- ☐ AAC ☐ Audiology ☐ Education Issues ☐ MN Voice
- ☐ Health Care Issues ☐ Multicultural Issues

■ Nominations and Elections

☐ AAC Evaluations and Therapy

(Clinic, School, Private) ■ Advertising/Marketing

☐ Continuing Education

Conventions

■ Membership

■ Newsletter

☐ Ethical Practice

☐ Financial Advisory

☐ Health Care Issues

☐ Legislative Steering

☐ Multi-Cultural Issues

☐ Peer Standards Review ☐ Recognition and Awards

☐ School Services Issues