

## Application for Division 3 Membership

**Please print out this form to mail or copy into the body of an e-mail application:**

Name (last name first) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone- Office (with area code) \_\_\_\_\_

e-mail address: \_\_\_\_\_

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

Ph.D. date \_\_\_\_\_

Ph.D. Institution \_\_\_\_\_

APA Member Number \_\_\_\_\_

Specific Field of Interest in Psychology: \_\_\_\_\_

**Dues for Division 3 are \$17.00. They will be collected by APA with regular membership dues.**

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Please mail or email this form to:

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