

**Application for Membership in SPSMM**  
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Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Home Telephone: \_\_\_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Office Telephone: \_\_\_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_ @ \_\_\_\_\_

APA Membership Status: (Please circle one)

Member/Fellow	Associate Member
Student Affiliate	Non-APA Member

APA Membership No.: \_\_\_\_\_

SPSMM Membership Status Desired: (Please circle one)

- Member (Psychology Doctorate, APA Member/Fellow) • \$25
- Associate Member (Associate Member of APA) • \$25
- Student Affiliate (Student Affiliate of APA) • \$5
- Affiliate (Interested in SPSMM & Non-APA Member) • \$25

Sex: (Please circle one)    Male    Female

Race/Ethnicity: (Please circle one)

European-American	African-American	Hispanic/Latino
Asian/Pacific Islander	American Indian/Alaskan	Other

Education: (Please circle one)

PhD	EdD	PsyD	MA/MS	MD	Other
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Make check payable to Division 51, SPSMM. Send application & check to Division 51 Administrative Office, American Psychological Association, 750 First St., NE, Washington, DC 20002-4242.