

STEP 1: CHOOSE YOUR MEMBERSHIP LEVEL & RATE

Membership Levels:

YOU MUST JOIN AT YOUR HIGHEST LEVEL OF ELIGIBILITY.

All members must subscribe to the EMDRIA Code of Conduct (www.emdria.org).

Full Member (Includes Online 'Find A Therapist' Search Listing & Full Voting Privileges)

Who is eligible?

1. Persons licensed, certified, or the equivalent as a mental health professional or per the guidelines of their state, province, or country.
2. Persons who have completed EMDRIA approved basic EMDR training.

Proof of completion of training required**

Associate Member (No Online 'Find a Therapist' Search Listing & No Voting Privileges)

Who is eligible?

1. Persons who are licensed, certified, or the equivalent as a mental health professional per the guidelines of their state, province, or country OR who are pursuing licensure under supervision and have NOT met the guidelines as outlined above for members OR other interested parties.

Student (No Online 'Find a Therapist' Search Listing & No Voting Privileges)

Who is eligible?

1. Persons who are enrolled FULL TIME in a University or Academic Institution.

Proof of Student status required (enrolled in a minimum of 9 hours per semester)**

Membership Rates:

- **Standard:** Designed for the majority of members
- **Agency Members*:** Clinicians who are employed by publicly funded agencies
- **University Faculty Members*:** For University faculty members.
- **Newly Trained*:** This is a "one-time only" reduced membership fee for those who have completed their initial basic EMDR training within 6 months of their application for Membership.

Proof of recent training, agency, or faculty status required**

* By selecting a discounted membership type, I am attesting that I meet the qualifications for eligibility, in addition to the standard requirements for membership level (i.e. Full, Associate, Student). *I realize that my eligibility will be confirmed by EMDRIA.*

** Please fax all required documentation to 512.451.5256 or mail to 5806 Mesa Dr., Ste. 360 Austin, TX 78731. *Your membership will not be completely processed until this documentation is received.*

	FULL	ASSOCIATE	STUDENT
STANDARD	\$150 (U.S.) \$170 USD (Non-U.S.)	\$125 (U.S.) \$145 USD (Non-U.S.)	\$50 (U.S.) \$70 USD (Non-U.S.)
AGENCY & UNIVERSITY FACULTY	\$105 (U.S.) \$119 USD (Non-U.S.)	\$90 (U.S.) \$102 USD (Non-U.S.)	—
NEWLY TRAINED	\$105 (U.S.) \$119 USD (Non-U.S.)	\$90 (U.S.) \$102 USD (Non-U.S.)	—

Our membership year runs from JANUARY 1st to DECEMBER 31st of each year. We do not prorate membership dues. Regardless of the month you choose to join, you will receive all issues of that year's Newsletters and access to past issues of the Journal online (no past hard copies of the Journal are included).

STEP 2: FILL OUT APPLICATION

2010 EMDRIA MEMBERSHIP APPLICATION

CONTACT/MAILING INFORMATION

PLEASE TYPE OR PRINT:

Last Name: _____ First Name: _____ MI: _____ Credentials: _____

Mailing Address: _____

City: _____ State/Prov: _____ Zip: _____ Country: _____

Office Phone: _____ Cell: _____ Email: _____

License #: _____ Jurisdiction (State): _____

Member Directory Preference: Online, updated regularly Printed* (check one only)

Journal Preference: Online Only Both Online & Printed (check one only)

Newsletter Preference: Online Only Both Online & Printed (check one only)

*Please note: The Spring 2010 printed Membership Directory will be the last printed Directory included as a Membership benefit.

EMDRIA is going GREEN!
Help save trees by choosing to receive
benefits online only!

DIRECTORY LISTING

Please use the information as listed above. Only list items in Directory that are completed below. No listing.

Directory Address: _____

City: _____ State/Prov: _____ Zip: _____ Country: _____

Office Phone: _____ Cell: _____ Email: _____ Website: _____

(For Full Members only)

SECONDARY ADDRESS DIRECTORY LISTING

Only list items completed below.

No secondary listing.

Secondary Directory Address: _____ Office Phone: _____

City: _____ State/Prov: _____ Zip: _____ Country: _____

May EMDRIA make your information available to EMDR education and training providers? Yes No

MEMBERSHIP LEVEL

Please choose your membership level and rate (all prices are in USD). For more information on levels, please visit the previous page.

FULL: STANDARD \$150 (Non U.S. \$170) AGENCY \$105 (Non U.S. \$119) NEWLY TRAINED \$105 (Non U.S. \$119) UNIVERSITY FACULTY \$105 (Non U.S. \$119)

ASSOCIATE: STANDARD \$125 (Non U.S. \$145) AGENCY \$90 (Non U.S. \$102) NEWLY TRAINED \$90 (Non U.S. \$102) UNIVERSITY FACULTY \$90 (Non U.S. \$102)

STUDENT: STANDARD \$50 (Non U.S. \$70)

YOU MUST SUBMIT ALL REQUIRED DOCUMENTATION IN ORDER FOR YOUR MEMBERSHIP TO BE PROCESSED. SEE THE PREVIOUS PAGE FOR DETAILS.

PAYMENT (U.S. FUNDS ONLY)

Use the blanks below to calculate your payment total. A \$10 tax-deductible donation to the EMDRIA Foundation Research Fund has been automatically included in your registration. If you would like to opt-out of this donation, please check the box below indicating such and do not add the \$10 to your total. If you would like to make an additional contribution to either EMDRIA Foundation funds, please specify below and include the tax-deductible donation in your total.

MEMBERSHIP LEVEL COST: _____

EMDRIA FOUNDATION RESEARCH FUND DONATION: \$10.00 (TAX-DEDUCTIBLE) (check box to opt out)

ADDITIONAL DONATION TO EMDRIA FOUNDATION RESEARCH FUND: _____ (TAX-DEDUCTIBLE)

DONATION TO THE EMDRIA FOUNDATION MEMORIAL CONFERENCE SCHOLARSHIP FUND: _____ (TAX-DEDUCTIBLE)

TOTAL PAYMENT: _____

Check or Money Order enclosed Check # _____ Charge my Credit Card (Visa/MC/Discover Only)

Card # _____ / _____ / _____ Expiration Date: _____

Name as it appears on card: _____

Signature: _____ Billing ZIP Code: _____

STEP 3: SUBMIT YOUR APPLICATION

Submit your application to EMDRIA: **Fax** to 512. 451.5256 (fastest option) **OR**
Mail to 5806 Mesa Dr., Suite 360, Austin, TX 78731 **OR**
Online at www.emdria.org