

# 2019 Membership and Renewal Application

Section VIII, Couple and Family Therapy and Psychoanalysis  
Society for Psychoanalysis and Psychoanalytic Psychology (Div. 39, APA)

Name: \_\_\_\_\_ Degree: \_\_\_\_\_

Date: \_\_\_\_\_ Email Address: \_\_\_\_\_

Are you a member of Division 39, American Psychological Association? \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone \_\_\_\_\_

Include home address in Section VIII directory? Yes \_\_\_ No \_\_\_

Office Address #1: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Office Address #2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Clinical/Research Interests (in order of importance) (NOTE: For the Membership Directory)

\_\_\_\_\_  
\_\_\_\_\_

Areas of Practice Specialization (in order of importance): (NOTE: For the Membership Directory)

\_\_\_\_\_  
\_\_\_\_\_

DUES: Member \$40 \_\_\_\_\_ Student \$10 \_\_\_\_\_ Retired \$40 \_\_\_ or \$10 \_\_\_\_\_

Voluntary Contribution \$ \_\_\_\_\_ General Fund \$ \_\_\_\_\_ Stechler Award \$ \_\_\_\_\_ Scholar's Award

\_\_\_\_\_ Check, payable to: "Section VIII, Div. 39, APA"

\_\_\_\_\_ Paid by credit card on Section VIII website

Billing Address \_\_\_\_\_

Signature: \_\_\_\_\_

Send form, with check or credit card information, to:

Section VIII Administrator, 67 Bremen Road, Waldoboro, ME 04572

For more information, contact Debbie Wolozin at [Deborah.Wolozin@gmail.com](mailto:Deborah.Wolozin@gmail.com)