



Community Membership Application

Name		Degree (MD, PhD, MSW, etc.)	
Mailing Address			
City	State	Zip	
Office Phone	Office Fax		
Email			
Website			

What is your profession? _____

If you are interested in volunteering (e.g. event registration, EBOR committee, publications committee) , please indicate your area(s) of interest and someone from NPS will contact you:

Please select one:

General Membership		\$95
Student (enrolled in a degree program)	School:	\$75
Candidate	Psychoanalytic Institute:	\$75
Retired		\$75

Please send your check payable to "NPS" to 1711 12th Avenue; Seattle, WA 98122