



Wisconsin Counseling Association

Student Membership Application

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	
University/College Attending	
Emphasis/Degree Track	

Membership

Please indicate membership registering for

FREE first year membership *only* if attending graduate school on at least a part-time basis.

*Faculty signature verifying graduate student status _____

A Student Member must be engaged at least part-time in a planned program of counselor education designed to result in a degree or certification as a counselor. No person shall be eligible to be or continue as a Student Member who has held that status for a total of three years, or who otherwise is eligible to be a Professional Member.

Regular Student Membership \$20

Committee(s) Would Like to Serve On:

Please indicate which areas you are interested in volunteering

WCA Summit

By Laws

Membership

Ethics

Public Relations

Government Relations

Website

Journal

Professional Development

Newsletters

Nominations

WCA Promotions

Mail Completed Form and Payment To:

Membership Chair
Angie Flannery
629 Floral Drive
Green Bay, WI 54301

RETURN TO: