

**Membership Application  
2017-2018**

Please return this form with payment to:

**MASP c/o Tracy Hobbs  
15620 Betsie River Drive, Thompsonville, Michigan 49683-9154**

Please print and submit one application per member.

\_\_\_\_\_  
Name E-Mail Address (*please print clearly*)

Check here if all information remains the same as previous year. If you were a member last year and are renewing, you only need to indicate any information that has changed and sign the application.

\_\_\_\_\_  
Mailing Address City State Zip

\_\_\_\_\_  
Home Phone or Cell Work Phone Ext.

\_\_\_\_\_  
Employer County of Employment

**MEMBERSHIP TYPE**

- \$80** Current School Psychologist
- \$80** Consultant, supervisor, or administrator in school psychological services or related area
- \$80** Primarily engaged in training of psychologists in a college or university
- \$25** Retired
- \$25** Student in a Michigan college or university enrolled in at least 6 semester hours leading to a degree in school psychology and not employed full time.  
Name of College/University: \_\_\_\_\_  
Signature of Adviser: \_\_\_\_\_
- \$40** Early Career. Applies to an individual who has graduated from a school psychology graduate program and is in his/her first year of practice.

**Method of Payment**

Check enclosed payable to: MASP

**PayPal**

Please go to [www.maspweb.com](http://www.maspweb.com) and click on *Join Us*. That link will take you to PayPal where you can renew your membership. You do not need to forward this application to us.

MASP respects your right to privacy. Periodically, in an effort to support University sponsored research, MASP may share membership information. Please indicate here if you do not want your information shared:

***The above information is true and correct to the best of my knowledge:***

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