



## 2006–2007 WSHA-P Member Application

Membership Year: July 1, 2006 – June 30, 2007

MAILING LABELS AND ON-LINE DIRECTORY INFORMATION ARE PREPARED BASED ON THE INFORMATION SUPPLIED.

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

Work Site: \_\_\_\_\_

Name of Facility or School District

Member ID#: \_\_\_\_\_

Primary Location (School or Department)

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

Address or PO Box

City State Zip

City State Zip

Home Phone: \_\_\_\_\_

Area Code / Number

Work Phone: \_\_\_\_\_

Area Code / Number

County of Residence: \_\_\_\_\_

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

Area Code / Number

Email: \_\_\_\_\_

List only one (1) address

Preferred Mailing Address:  Home  Office

Check here if you want your mailing information omitted from labels sold for non-WSHA-P related activities.

Receive **Communication Connection** By:  Email  Mail

Receive **News Brief** By:  Email  Mail

Degree/s:  PhD  AuD  MA  MS  MST  
 BA  BS  Other \_\_\_\_\_

License/s:  DRL (State) - Aud  DPI - Aud  
 DRL (State) - SLP  DPI - SLP

ASHA Certification/s:  CCC-A  CCC-SLP  
 CF-A  CF-SLP

Work Setting/s:

Business/Non-Clinical  Center/Clinic  Hospital  
 Long Term Care  Outpatient Office  
 Private Practice  Research Facility  School  
 University  Other \_\_\_\_\_

Ages Served:

All  Birth–3  Early Childhood (3–5)  
 Elementary School (6–11)  Middle/High School (12–18)  
 Adults  Geriatrics

Please rank your 4 main areas of interest from 1-4 (1=primary). This information will be used by colleagues, referral sources and the Executive Board.

### Speech-Language Pathology

- General Practice (GP)
- Admin, Supervision, Program Support (AdmSLP)
- Augmentative & Alternative Communication (AugSLP)
- Cancer, Head and Neck (CASLP)
- Childhood Language Disorders (PedLangSLP)
- Craniofacial Anomalies (CranioSLP)
- Diagnostics (DiagSLP)
- Dysphagia, Feeding, Swallowing (DysphSLP)
- Fluency Disorders (FluencySLP)
- Foreign Accent (AccentSLP)
- Hearing Impaired (HearSLP)
- Language Disorder (LangSLP)
- Language Science (LaSciSLP)
- Mental Illness (MentalSLP)
- Myofunctional Disorders (MyoSLP)
- Neurogenic Disorders (NeuroSLP)
- Pervasive Developmental Disorders (PDDSLP)
- Phonology/Articulation (PhonSLP)
- Speech Science (SpSciSLP)
- Voice Disorders (VoiceSLP)
- Other \_\_\_\_\_

### Audiology

- General Practice (GP)
- Administration and Supervision (AdmAud)
- Aural Rehabilitation (RehabAud)
- Central Auditory Processing (CAPAud)
- Cochlear Implantation (ImplAud)
- Diagnostics (DiagAud)
- Educational Audiology (EdAud)
- Electrophysiology (ElectroAud)
- Hearing Instrument Dispensing (DispAud)
- Hearing Science (SciAud)
- Intraoperative Monitoring (OrAud)
- Manufacturing Rep (MfgAud)
- Occupational Audiology (OccAud)
- Pediatric Diagnostics and Rehab (PedAud)
- Vestibular System Diagnostics (VestAud)
- Other \_\_\_\_\_

WSHA-P welcomes volunteers. Please check your area of interest.

- Executive Board
- Audiology
- Birth-to-Three
- Communication Connection
- Convention
- Developmental
- Governmental Affairs
- Health Care
- Honors
- Member Relations
- School Services
- Students
- Editorial

Potential clients often call WSHA-P for assistance in finding an audiologist or speech-language pathologist. Would you be interested in participating in the WSHA-P Referral Program?

Yes  No

**I am applying for the following membership:**

- Regular-\$95.00 (7/1/06-6/30/07)** Persons with a graduate degree in speech-language pathology, audiology, speech, language, or hearing science, or education of the hearing impaired; or a graduate degree or its equivalent and evidence of research, interest, and performance in human communication.
- Associate-\$90.00 (7/1/06-6/30/07)** Persons with an undergraduate degree, or a graduate degree in related professional disciplines, or with an interest in speech, hearing or language who do not qualify as Regular Members.
- Honorary (Life)** Persons having a long-term affiliation with WSHA-P, significant contribution to the profession or other criteria as stated in the Association's Policy & Procedures. Current life members may continue this status. Annual dues shall be waived in perpetuity.
- Student Member-\$25.00 (7/1/06-6/30/07)** Persons currently enrolled in full-time in a college or university within the State of Wisconsin majoring in communicative disorders, speech-language pathology, audiology or related disciplines.

**Students, please include school and department chair signature:** \_\_\_\_\_

\_\_\_\_\_

**If paying by credit card, please complete the following:**

Please charge my:  VISA  MasterCard  Discover

Credit Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

Security Code (last 3 numbers found on back of card): \_\_\_\_\_

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

***\*37.5% of WSHA-P dues for 2006-2007 cannot be deducted as a business expense for federal income tax purposes due to our lobbying activities. (This is not a PAC.)***

\$ \_\_\_\_\_ Subtotal\*

**I would also like to contribute to the following:**

\$ \_\_\_\_\_ Student Member Sponsorship

\$ \_\_\_\_\_ WSHA Foundation (please include separate check made payable to the WSHA Foundation)

**\$ \_\_\_\_\_ TOTAL ENCLOSED**

**Thank you for your support of WSHA-P.**  
**Please send this completed form and payment (checks payable to WSHA-P) to:**  
Wisconsin Speech-Language Pathology and Audiology Professional Association  
1360 Regent Street #154 ● Madison, WI 53713  
Fax: 888-729-3489 ● Phone: 800-545-0640  
Email: wsha@wisha.org ● Web site: www.wisha.org