ARIZONA ASSOCIATION FOR THE TREATMENT OF SEXUAL ABUSERS
MEMBERSHIP APPLICATION/RENEWAL FORM

NOTE: In order to be a member of the state chapter of ATSA (AzATSA), one must first be a member of the ATSA organization.

If you are an ATSA member and want to become a member of the state chapter, please complete the membership form below and return it, along with $35.00 dues for the current calendar year. No receipts will be returned to you, so please maintain your own check record. You may use Paypal and email this form if you prefer.

If you are not yet an ATSA member, an application is available by contacting www.atsa.com or calling (503) 643-1023. After you have applied to ATSA, you may send this application and membership fees to the address below. Please notify Marcy Wilkerson, Treasurer, when your ATSA membership is accepted, so that the AzATSA membership roster can be updated. See the AzATSA website: AzATSA.com.

Mail to: AzATSA
PO Box 327
Gilbert, Az 85299-0327

Email to: Marcy@mountainvalleyaz.com

Questions: Sylvia Neal, AzATSA President @ (520) 219-1992
Kandra Berry, AzATSA Secretary @ (602) 540-7192
Marcy Wilkerson, AzATSA Treasurer @ (602) 679-3195

Check One:

_____ I am renewing my AzATSA membership
_____ I would like to become a new AzATSA member

Check One:

_____ I am a current member of ATSA
_____ I have applied for membership in ATSA

Please Print:

Name (& professional credentials): _____

Company name: _____

Mailing Address: _____

E-Mail Address: _____

Contact Telephone Number (include area code): _____

_____ Check is enclosed _____ I paid using Paypal (copy of receipt is enclosed)

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For Office Use:

Date Paid: _____ Check #: _____ Cash: _____