**MSCSW Membership Application 2018-2019**Please note the information from this form will be available to our members via the membership directory. Those with an \* will also be available on our website via our online directory at MSCSW.com.

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| **CONTACT INFORMATION** |
| Name\* |  |
| Street Address |  |
| City St Zip\* |  |
| Home Phone |  |
| Work Phone\* |  |
| Email Address\* |  |

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| **CREDENTIALS AND PRACTICE INFORMATION** |
| Degree, License |  |
| Areas of Specialization |  |
| Insurances Accepted |  |
| Clinical Supervisor? | Yes / No | Clinical Consultant? | Yes / No | Private Practice? | Yes / No |
| Interest injoining board? |  Yes / No | Interest in joining committee? | Yes / No | Comments: |

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| **MEMBERSHIP TYPES**  |
| Please Circle Your Desired Membership  |
| **One Year - LCSW Membership**  $120Through June 30, 2019 | **Two Year - LCSW Membership**  $220Through June 30, 2020  |
| **One Year - Post Graduate/LMSW** $70Through June 30, 2019  | **Two Year - Post Graduate/LMSW**  $120Through June 30, 2020  |
| **One Year - Student Membership** $20Through June 30, 2019  |  |

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| **PAYMENT INFORMATION** |
| Checks can be made payable to Missouri Society for Clinical Social Work.Mail completed applications and payment to 6829 Gravois Ave., Saint Louis, MO 63116. |
| Credit card payments can be made by calling Jodi Hogue at the number below or signing up online at www.mscsw.com.  |
| Referral Source: | For Questions Call Jodi Hogue at 314-643-7896 |

Please use the back of this form to tell us information about yourself. We will use this information for our “New Members” section of our newsletter.