



**2010-2011 MEMBERSHIP APPLICATION (Cont.)  
(October 2010 – September 2011)**

**MEMBER REFERRAL LISTING & SPEAKERS BUREAU**

Would you like your practice to be included on the WAMDA member referral listing? Or be listed as a potential speaker for the community? If so, please fill out the following information:

**Contact Information to List (your name, address, telephone and e-mail):** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Business Name:** \_\_\_\_\_

**Areas of Counseling and Speaking Specialty:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Other Relevant Information (bilingual, services, website, blog, etc.)** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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**PROGRAM PLANNING SURVEY**

Interested in having a speaker on a specific topic? If so, please write in a specific topic or speaker.

1. \_\_\_\_\_

2. \_\_\_\_\_

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**Mail By: September 23, 2010**

**Dues: \$20.00 (\$25.00 if mailed after 9/30/10)**

**Students and Retired members: \$10.00 (\$15.00 if mailed after 9/30/10)**

**Make checks payable to: WAMDA**

**Send dues to:**

**WAMDA  
c/o Corresponding Secretary  
5 King Road  
Somers, CT 06071**

**RECRUIT AND SAVE \$5 FOR BOTH YOU & THE NEW/LAPSED MEMBER!!**