MEMBERSHIP APPLICATION
MICHIGAN SCHOOL COUNSELOR ASSOCIATION

MEMBERSHIP INFORMATION

___ I am a new MSCA member
___ I am renewing my MSCA membership

LEVEL:
___ Elementary
___ Middle/Junior High
___ High School
___ Post Secondary

MEMBERSHIP TYPES

Professional: Anyone engaged in school guidance and counseling or related activities.

Affiliate: Anyone interested in school guidance and counseling, not eligible for other types of membership.

Retired: Anyone retired from the school counseling profession.

Student: Anyone enrolled in an approved graduate program in school guidance and counseling.

Please check one:
___ Professional $65.00
___ Affiliate $65.00
___ Retired $35.00
___ Student $35.00 (Requires the signature of a professor in your major.)

PROFESSOR’S SIGNATURE

PHONE

NOTE: A percentage of your association dues is tax deductible.

I am enclosing a check in the amount of $____________ for a one year membership in the Michigan School Counselor Association. I agree to abide by the MSCA Bylaws and the American School Counselor Association Ethical Standards.

SIGNATURE  DATE

Please make checks payable to:
Michigan School Counselor Association

Mail to: MSCA
P.O. Box 473
Schoolcraft, MI 49087

BENEFITS OF ASSOCIATION MEMBERSHIP

MSCA Members receive:
✓ Lobby Updates
✓ Quarterly Newsletter
✓ Annual Directory
✓ Discounts on MSCA Produced Materials
✓ Reduced Rates at MSCA Sponsored Conferences
✓ Consultation on Ethical Issues
✓ Opportunity for Mentoring
✓ An Identity with Professional School Counseling
✓ Professional Recognition Program
✓ Consultation with the MSCA Governing Board

The Michigan School Counselor Association
- serving professional school counselors in Michigan since 1964 -