

•Member Contact Updates & Corrections:
 Please update/correct your contact information on the Payment Form below. Remember to include any changes to your home/work phone(s), fax, and email information.

•Last Name Notification: All members with hyphenated or two last names are automatically registered at CSHA with all names that appear after the first name listed below. If you wish to be identified under a different name, so indicate by underlining your preferred last name. Please make sure to be consistent and use this last name for all CSHA member inquiries and/or conference registrations.

•Directory Listings:
 Refer to the back of this form for information regarding the CSHA on-line directory for members only and the hard copy directory. Please indicate your listing preference(s) on the Payment Form below.

•Bilingual Professionals:
 In order to be listed in the CSHA Foreign Language Directory, you must agree to the definition of a bilingual professional as described in the statement included on the reverse side of this form. If you are in agreement to these terms and wish to be listed as a bilingual professional, please include your signature on the backside of this Payment Form.

•Professional 2008 "Pre-Pay" Option:
 Dues payments may be deductible as an ordinary and necessary business expense.
 Our records indicate you have paid through December 31, 2008. You may choose to pay your dues through December 31, 2009 by filling out this form.

Please check corresponding box(es) & amount sent to CSHA for your payment record.

Pre-Paid \$110 Professional Dues for One Year
 Pre-Paid membership runs through December 31, 2009.

CSHA Political Action Committee (PAC):
 Paid \$25 Paid \$50 Paid \$75 Paid Other \$ _____
 Contributions to PAC are not deductible as charitable contributions for Federal Income Tax purposes.

Student Scholarship Fund
 Paid \$25 Paid \$50 Paid \$75 Paid Other \$ _____
 Donation for students' registration fee for the CSHA State Convention.
 Paid \$ _____ for # _____ Member Directory(ies) Directories are \$25 each.

PAYMENT RECORDS

Dues and Contributions Paid By:

Mastercard or Visa Amount Charged: \$ _____
 Check # _____ Amount Paid: \$ _____
 Money Order Reference# _____ Amount Paid: \$ _____

TOTAL AMOUNT PAID: \$ _____

*Keep for your records

**Members Enjoy a Reduced Registration Fee at the
 2008 CSHA Annual State Convention!**

April 10-13, 2008 at the The Monterey Marriot & The Portola Plaza!
 Check your mailbox mid-January for the Convention Program Book!
 Visit CSHA online & get the latest details for

•The 2008 CSHA Annual Convention • Upcoming CE Opportunities•
 •The Latest Legislative News• Pay Your Dues Online! •



Come visit us at:
www.CSHA.org

*Cut here and return to CSHA with payment

*Please disregard this notice if payment has been submitted.

•Member Contact Updates Corrections & Last Name Notifications:
 Please refer to the corresponding statement at the top of this form for further definitions and instructions regarding member contact information.

PLEASE SUBMIT THIS FORM WITH ANY CONTACT INFORMATION UPDATES,
 YOUR CURRENT DIRECTORY LISTING PREFERENCES, AND IF APPLICABLE,
 BILINGUAL DEFINITION AGREEMENT.

•Directory Listings:
 Please refer to the reverse side of this form for information regarding Directory Listings & the corresponding definitions of each preference. Please check all listing preferences that apply in the appropriate boxes below.

Do NOT list my contact information in either directory.
 Please list me in both directories with the following contact information:
 Address Home Phone Work Phone
 FAX Email All Contact Information

•Professional 2008 "Pre-Pay" Option:
 Our records indicate you have paid through December 31, 2008. You may choose to pay your dues through December 31, 2009 by filling out this form.

Dues payments may be deductible as an ordinary and necessary business expense. Please check corresponding box(es).

"Pre-Pay" Professional Dues for One Year \$ 110
 Membership will be extended through December 31, 2009.

CSHA Political Action Committee (PAC):
 \$25 \$50 \$75 Other \$ _____ \$ _____
 Contributions to PAC are not deductible as charitable contributions for Federal Income Tax purposes.

Student Scholarship Fund
 \$25 \$50 \$75 Other \$ _____ \$ _____
 Donation for graduate students' registration fee for the CSHA State Convention
 Member Directory # _____ of Directory(ies) @ \$25 each \$ _____

TOTAL AMOUNT DUE: \$ _____

•Bilingual Professionals:
 PLEASE REFER TO THE BACK OF THE PAYMENT FORM.

Please make Checks & Money Orders Payable to CSHA

Check # _____ Amount Paid: \$ _____
 Money Order Reference# _____ Amount Paid: \$ _____

Credit Card Payments may be FAXED to: (916) 921-0127

Mastercard Visa Exp. Date: _____ Charge Amount: \$ _____

Acct.#: _____

Signature: (Required for credit card payment) _____