



Human Lives. Human Connection.

# 2019-2020 Membership Application

Date \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home ( ) \_\_\_\_\_ Work ( ) \_\_\_\_\_

Fax ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

**NOTE:** Please know that many school districts block group e-mail notices. If you think your work setting blocks group e-mail notices, please provide us with an alternate e-mail address.

## Membership Account — Now Online!

Go to: [www.csha.org](http://www.csha.org) and click "Sign In" to access your online account. Renew membership dues, change your personal information, view transcripts, print CE certificates and ID cards, upload photo to profile, and view past magazine issues.

### Members enjoy a reduced registration fee at the CSHA Annual Convention!

March 19-22, 2020 | Anaheim, CA  
March 11-14, 2021 | San Francisco, CA

**SAVE TIME, APPLY ONLINE!**  
[www.csha.org](http://www.csha.org)

#### MEMBERSHIP REQUIREMENTS

**Professional members** shall be persons who hold a graduate degree with major emphasis in speech-language pathology, audiology, or speech-language and hearing science as described in the standing rules; or a graduate degree and present evidence of active research, interest and performance in the field of human communication.

**Associate members** shall be persons qualified in a related profession who are members in good standing of said profession and who subscribe to the purpose of this association. **Student members** shall be persons actively pursuing college or university training in speech and language pathology, audiology, or speech and hearing sciences and *who do not qualify for professional membership*. **Paraprofessional members** shall be persons who have met the academic and supervised training requirements set forth by the Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board (SLPAHADB) and have been registered by the board as speech-language pathology assistants. Professional members shall have all privileges of the association. Associate, student and paraprofessional (SLPAs) members have all privileges of the association except voting and holding office.

**Life Members** shall be persons who have attained the age of sixty-five (65) and have been Professional Members for the previous twenty (20) consecutive years.

#### Duties and Responsibilities of Members:

Members Shall:

- 1) Agree to abide by the CSHA Code of Ethics;
- 2) Participate in continuing education;
- 3) Be responsible for communicating unique concerns and interests to the board of directors;
- 4) Speak as a representative of the association only when serving in an official capacity with approval of the CSHA president and/or board of directors.

#### DIRECTORY LISTING INFORMATION

**CSHA's Membership Directory is available on the CSHA website and only accessible to CSHA members. Security measures include a firewall with a member login ID.**

Do NOT list my contact information in the directory.

#### MEMBERSHIP PAYMENT

<input type="checkbox"/> Professional Dues	\$160
<input type="checkbox"/> Paraprofessional Dues	\$85
<input type="checkbox"/> Associate Dues	\$85
<input type="checkbox"/> Student Dues	\$50

**TOTAL AMOUNT DUE: \$ \_\_\_\_\_**

#### Please make checks & money orders payable to CSHA

Check # \_\_\_\_\_  MO # \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_

Credit Card Type \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Credit Card # \_\_\_\_\_ CVV# \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Credit Card Billing Address \_\_\_\_\_

Signature (Required): \_\_\_\_\_

#### Return application and payment to:

CSHA Headquarters  
825 University Avenue  
Sacramento, CA 95825

**Membership Year:** CSHA membership runs from July 1 to June 30.

CSHA dues are not tax deductible as a charitable contribution for federal income tax purposes; however, they may be tax deductible as ordinary and necessary business expenses. Please check with your tax advisor. CSHA estimates that 5 percent of your membership dues are allocable to lobbying activities of CSHA and therefore are not deductible for income tax purposes. CSHA dues are non-refundable.

## MEMBERSHIP INFORMATION

### Membership Type

Professional  Associate  Paraprofessional (SLPA)  Student If Student, Graduation Date: \_\_\_\_\_

### Gender

Male  Female

### Age Category

18-29  30-39  40-49  50-65  65+

### Professional Title at Place of Primary Employment

Department Chair

Professor

Assoc. Prof.

Assist. Prof.

Instructor

Director of \_\_\_\_\_

Audiologist

Teacher, Hearing Impaired

Speech Language Pathologist

Speech & Hearing Consultant

Resource Specialist

Speech Language Pathologist and Audiologist

Teacher, Severe Oral Language Delay

Supervisor, Special Education Services

Program Specialist

Retired

Supervisor, DIS

LH Teacher

General Education Teacher

Not Presently Employed

Other \_\_\_\_\_

### Place of Employment

Employer: \_\_\_\_\_

Years in Profession: \_\_\_\_\_

#### Primary Employment: (more than 50% time)

Schools, Non-Public

Private Practice

Academic, College/University

Clinic, Medically Based

Community Agency or Clinic

Medical Center

Clinic, College/University Based

Schools, Public

(Avg. caseload = #dup: \_\_\_\_\_ #undup: \_\_\_\_\_)

#### Secondary Employment: (less than 50% time)

Schools, Non-Public

Private Practice

Academic, College/University

Clinic, Medically Based

Community Agency or Clinic

Medical Center

Clinic, College/University Based

Schools, Public

#### Please check the following options which apply:

1. Speciality:

Speech-Language Pathology

Audiology

Both

2. Work with Children, Ages: (if applicable)

0-3 Years

3-5 Years

5-17 Years

### Foreign Language Registry

Please register only if you are willing to provide clinical services in the language checked.

Arabic

Armenian

Chinese, Cantonese

Chinese, Mandarin

Farsi, Persian

French

German

Hebrew

Hmong

Italian

Khmer, Cambodian

Korean

Laotian

Portuguese

Russian

SEE Sign

Sign Language (ASL)

Spanish

Tagalog

Vietnamese

Yiddish

Other (please specify): \_\_\_\_\_

### Certification and Licensure

#### Check ONLY if completed:

CCC Audiology

CCC Speech Pathology

Language, Speech & Hearing Specialist Credential

Educational Audiologist Credential

Administrative Services Credential

Audiologist

License in Speech-Language Pathology

Bilingual Cross-Cultural, Language & Academic Certification

Specialty Certification:

Hearing Aid Dispenser's License

#### Check ONLY if in progress:

CF in Audiology

RPE in Audiology

CF in Speech Pathology

RPE in Speech Pathology

SLPA

### California License

Speech-Language Pathologist #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Audiology #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Speech-Language Pathologist Assistant #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

### Highest Academic Degree Held:

B.A.  B.S.  M.A.  M.S.  M.Ed.  Ph.D.  Ed.D.  AA (SLPAs)  Other \_\_\_\_\_

### Areas of Interest for Selective Mailings

Audiology, Education and Habilitation of Hearing Impaired

Education & Habilitation of Children with Severe Language Disorders

Private Practice

Professional Preparation (includes master supervisors of CFs & RPEs)

Speech, Language and Hearing Services in Medical Rehabilitation Centers and Community Agencies

Language, Speech and Hearing Services in the Schools

Community Colleges

### Membership in Other Organizations:

#### Check all that apply:

ASHA  CEC  ACSA  CTA  CRA  CAA  AAA  NSSHLA  Other \_\_\_\_\_