



RESNA

MEMBERSHIP

NEW MEMBER RENEWAL

NAME CREDENTIALS

EMPLOYER TITLE

MAILING ADDRESS CITY STATE ZIP

EMAIL (required to receive newsletter and member notices, and for on-line journal access)

WORK PHONE CELL (optional) FAX

CHOOSE A SIG & PSG

Membership includes **Special Interest Groups** and **Professional Specialty Groups**.

Special Interest Groups

- Access and Communication Technology
- Accommodations (AC)
- Cognition and Sensory Loss (COG)
- Emerging Technology (NEW)
- International (INT)
- K-12 Practice (K12)
- Wheeled Mobility and Seating (WM)

Professional Specialty Groups

- Suppliers & Manufacturers
- Physical Therapists
- Occupational Therapists
- Speech-Language Pathologists
- Special Education
- Educators
- Vocational Rehabilitation

MEMBERSHIP RATES

New Member – 1 yr \$150 _____

Student \$65 Consumer \$85 _____

New Member – 2 yr \$250 _____

1-yr membership renewal:

Regular \$175 Certified ATP/RET/SMS \$175 _____

2-yr membership renewal:

Regular \$340 Certified ATP/RET/SMS \$340 _____

Print Journal subscription - \$30 _____

Contribution to RESNA Founders Fund _____

TOTAL \$ _____

PAYMENT

Visa Mastercard AmEx Discover Check

NAME ON CARD _____

CREDIT CARD NUMBER _____ EXP DATE _____

Three digit security code _____

BILLING ADDRESS _____

CITY _____ STATE _____ ZIP _____

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