

ACYCP Annual Membership Enrollment/Renewal Form

Please select your membership choice:

- Annual ACYCP Individual or Renewal Membership - \$35 per person per year
- Annual ACYCP Student Membership - \$20 per person per year
- Annual ACYCP Agency Membership (1-20 Staff) - \$500 per agency per year
- Annual ACYCP Agency Membership (20-40 Staff) - \$1,000 per agency per year
- Annual ACYCP Agency Membership (42+ Staff) - \$20 per staff member per year

ACYCP + FICE USA Council Membership

- Annual ACYCP Individual or Renewal Membership - \$70 per person per year
- Annual ACYCP Student Membership - \$40 per person per year
- Annual ACYCP Agency Membership (1-20 Staff) - \$1,000 per agency per year
- Annual ACYCP Agency Membership (20-40 Staff) - \$2,000 per agency per year
- Annual ACYCP Agency Membership (42+ Staff) - \$30 per staff member per year

FORM FIELDS NEEDED:

Last Name

First Name

Agency

Home Address

City

State

ZIP

Phone

Email:

Child & Youth Care SPECIALTY field

What primary factor caused you to apply/renew for ACYCP membership?

(Check only one)

- ___ ACYCP On-line Publication
- ___ Professional colleague
- ___ Friend
- ___ Supervisor
- ___ CYCCB Certification
- ___ Agency requirement
- ___ Instructor
- ___ ACYCP website
- ___ ACYCP webinar
- ___ ACYCP email promotion
- ___ ACYCP general renewal reminder
- ___ ACYCP personal renewal reminder
- ___ ACYCP FICE-USA Global Work
- ___ Other:

- Yes, I'm interested in being a regional or state ACYCP coordinator
- Yes, I'm interested in being an ACYCP committee member
- Yes I'm interested in joining ACYCP + FICE USA Global Youth Work Council
- Yes, I'm interested in being a webinar, workshop, or conference presenter

NOTE: ACYCP WILL EMAIL YOU AN INVOICE.