

**THE NORTHERN CALIFORNIA SOCIETY FOR PSYCHOANALYTIC PSYCHOLOGY  
MEMBERSHIP RENEWAL FORM**

Name: \_\_\_\_\_

**MEMBERSHIP CATEGORIES AND DUES**

\_\_\_\_\_ **MEMBER (\$105.00)**

All licensed mental health professionals who have an interest in psychoanalysis and/or psychoanalytic psychotherapy. Member status does not, by itself, imply competence to practice psychoanalysis and/or psychotherapy.

\_\_\_\_\_ **ASSOCIATE MEMBER (\$50.00)**

Individuals, not currently students, who are not licensed in any of the mental health disciplines, or who are no longer practicing in any of the mental health disciplines, or who live out of state (and thus are unable to take advantage of our programs in person).

\_\_\_\_\_ **STUDENT (\$25.00)**

Individuals currently enrolled in an undergraduate or graduate school in a mental health discipline. Please include a copy of current student ID.

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