

OHIO COUNSELING ASSOCIATION

MEMBERSHIP FORM 2011 - 2012

Last Name _____ First _____ Middle Init. _____

Home Address _____
Street City State Zip

Home Phone _____ Work Phone _____

Present Position _____ Employer _____

E-mail Address _____

License LPC LPCC SCHOOL COUNSELOR

Once you join OCA, you are awarded chapter membership at no additional charge. The chapter you designate will receive a percentage of your OCA membership dues. *However, you **must join OCA in order to join any chapter or OACES, OASERVIC and ALGBTICO.***

CHAPTERS (select one)

- COCA – Central Ohio Counseling Assn.
- EOCA – Eastern Ohio Counseling Assn.
- GCCA – Greater Cincinnati Counseling Assn.
- MVCA – Miami Valley Counseling Assn.
- NCOCA – North Central Ohio Counseling Assn.
- NWOCA – Northwest Ohio Counseling Assn.
- SEOCA – Southeast Ohio Counseling Assn.

ROLE(S) IN WHICH WILLING TO SERVE:

- Public Relations
- Membership
- Newsletter
- Awards
- Finance
- Other: _____
- Professional Development
- Government Relations
- OCA Officer
- Chapter/Division Officer
- Ethics

MEMBERSHIP IS VALID FOR ONE YEAR FROM THE DATE OF PROCESSING BY OCA OFFICE.

OHIO LEGISLATIVE INFORMATION:

Senator _____

Representative _____

Bd. of Ed. Rep. _____

To contact OCA: Call (614) 833-6068

Email: ocaohio@yahoo.com

Website: www.ohiocounseling.org

OCA MEMBERSHIP TYPE

- Life \$600.00
- Professional \$90.00
- Associate (holds no counseling credential) \$90.00
- Retired \$40.00
- Student \$25.00
- Membership Certificate \$10.00

DIVISIONS

OACES (Ohio Association for Counselor Education & Supervision)	<input type="checkbox"/> Professional <input type="checkbox"/> Student/Retired	\$20.00 \$10.00
OAMCD (Ohio Association for Multicultural Counseling & Development)	<input type="checkbox"/> Professional <input type="checkbox"/> Student	\$15.00 \$7.50
OMHCA (Ohio Mental Health Counselors Association)	<input type="checkbox"/> Professional <input type="checkbox"/> Student	\$25.00 \$12.50
OCDA (Ohio Career Development Association)	<input type="checkbox"/> Professional <input type="checkbox"/> Student/Retired	\$20.00 \$10.00
OASGW (Ohio Association for Specialists in Group Work)	<input type="checkbox"/> Professional <input type="checkbox"/> Student/Retired	\$15.00 \$7.50
OSCA (Ohio School Counselor Association)	<input type="checkbox"/> Professional <input type="checkbox"/> Student/Retired	\$50.00 \$20.00
OASERVIC (Ohio Association for Spiritual, Ethical & Religious Values in Counseling)	<input type="checkbox"/> Professional <input type="checkbox"/> Student	\$10.00 \$5.00
ALGBTICO (Assn. for Lesbian, Gay, Bisexual & Transgender Issues in Counseling of Ohio)	<input type="checkbox"/> Professional <input type="checkbox"/> Student/Retired	\$10.00 \$5.00

TOTAL ENCLOSED \$ _____
(Add OCA Membership Type + Division Dues)

Make check payable to: **OCA**
Send to: **OCA**
8312 Willowbridge Place
Canal Winchester, OH 43110