



## 2018 Membership Application

Please send this completed application to: Attn: Kathy Payares, 400 Celebration Pl. Celebration, FL 34747 Suite. A-250

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

Title: \_\_\_\_\_ License # \_\_\_\_\_

Preferred Email Contact: \_\_\_\_\_

Preferred Mailing Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Preferred Phone: \_\_\_\_\_

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

Which Region/Area is closest to your location?

NW Region (Panhandle, Tallahassee)

NE Region (Jacksonville, Gainesville, Daytona)

Central Region (Ocala, Citrus & Hernando County, Leesburg, Orlando, Villages, Brevard County)

SW Region (Tampa, Port Charlotte, Ft. Meyers, Collier County)

SE Region (Vero Beach, Ft. Pierce, West Palm, Ft Lauderdale, Miami)

FSOSW Social Worker of the Year Recipient      Year Recognized? \_\_\_\_\_

Membership:       Full: \$ 35.00       Associate: \$35.00       Student \$20.00

By signing this application and becoming a member I agree to follow the National Association of Social Workers Code of Ethics.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date