



c/o Chase Manhattan Bank,  
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Website: [www.agpa.org](http://www.agpa.org)  
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RENEW1

Member ID # \_\_\_\_\_

## 1 Membership Renewal

<b>Annual Gross Income</b>	DUES
<input type="radio"/> \$24,999 and under	\$140
<input type="radio"/> \$25,000-\$49,999	\$240
<input type="radio"/> \$50,000-\$74,999	\$315
<input type="radio"/> \$75,000-\$100,000	\$390
<input type="radio"/> Over \$100,000	\$475
<input type="radio"/> Senior Clinician	\$600
<b>Student/Resident</b> (submit verification of current full-time student/resident status)	\$65
<input type="radio"/> Institution:	
Anticipated Graduation Date:	
<b>New Professional Member</b> (Graduation must be after 1/1/2008)	\$80
<input type="radio"/> Graduation Date:	
<input type="radio"/> New Professional Membership Upgrade: If you graduated before 7/1/2008, you are now eligible for Associate Clinical or Adjunct Membership. Attach a copy of your license if applicable. Please pay dues according to income scale above.	
<input type="radio"/> <b>Retired:</b> To qualify, you must be fully retired from active practice.	\$65
<input type="radio"/> <b>Life Members:</b> Eligible for a 50% dues reduction. Members in active practice are asked to consider full payment at their dues level. Please call AGPA to verify if you qualify for life membership. (Cannot be combined with Retired rate.)	

If special consideration for dues reduction is required to maintain membership, please contact the Association office.

## 2 Group Psychotherapy Foundation Contribution

I support the work of the Group Psychotherapy Foundation and wish to contribute. Gifts support education, scholarships, community outreach, and research to advance the field. Donations to the Group Psychotherapy Foundation are tax-deductible as charitable contributions for federal income tax purposes to the extent provided by law.

<input type="radio"/> Contributor (up to \$150):	_____
<input type="radio"/> Donor (\$150-\$499):	_____
<input type="radio"/> Supporter (\$500-\$999):	_____
<input type="radio"/> Guide (\$1,000 and over):	_____
<input type="radio"/> Use my contribution where it is most needed.	
<input type="radio"/> Please designate my contribution for: _____	
<input type="radio"/> My contribution of \$ _____ is to be charged to my credit card	
<input type="radio"/> One time with this dues renewal	<input type="radio"/> Annually
<input type="radio"/> Quarterly	<input type="radio"/> Monthly

## 3 Certification

- I'm interested in becoming a Certified Group Psychotherapist. Please send me an application.

## 4 Publications

	Member Cost	S&H
<input type="radio"/> Group Works Brochure	Free	n/c
<input type="radio"/> Group Works Video!	\$14.95	\$6.00
<input type="radio"/> Video: Group Therapy: A Live Demo with Yalom and Leszcz, Individual Version	\$59.00	\$6.00
<input type="radio"/> Video: Group Therapy: A Live Demo with Yalom and Leszcz, Institutional/Instructor's Version	\$169.00	\$6.00
<input type="radio"/> Adolescent Group Psychotherapy: Method, Madness and the Basics Curriculum Guide	\$60.00	\$6.00
<input type="radio"/> CORE Battery-Revised: An assessment tool kit for promoting optimal group selection, process and outcomes	\$100.00	\$6.00
<input type="radio"/> Curriculum for Psychoeducational Groups	\$60.00	\$6.00
<input type="radio"/> Ethics in Group Psychotherapy Course Curriculum Guide	\$60.00	\$6.00
<input type="radio"/> Group Interventions for Disaster Preparedness and Response	\$28.00	\$6.00
<input type="radio"/> Group Interventions for Treatment of Psychological Trauma Curriculum Guide	\$100.00	\$8.00
<input type="radio"/> Group Psychotherapy Approaches to Addiction & Substance Abuse	\$60.00	\$6.00
<input type="radio"/> Group Psychotherapy with Children Curriculum Guide	\$60.00	\$6.00
<input type="radio"/> Principles of Group Psychotherapy Core Course Curriculum Guide	\$60.00	\$6.00
<input type="radio"/> Training in Group Psychotherapy Supervision Course Curriculum Guide	\$60.00	\$6.00

## 5 Payment Information

AGPA Membership Dues Renewal	\$ _____
Group Psychotherapy Foundation Contribution	\$ _____
Membership Certificate (\$22 each)	\$ _____
Publications ordered	\$ _____
<b>TOTAL REMITTED</b>	\$ _____

- Check payable to AGPA. (Checks must be in U.S. Currency or drawn on a U.S. Bank.)

- Credit Card:     Visa     MasterCard     AMEX

Account#: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

### Questions?

Phone, fax, or e-mail AGPA as listed above or visit our website at [www.agpa.org](http://www.agpa.org) to get the latest news and information about what's going on in the Association.

Please note any changes or corrections on address label.