



Membership Form

(Annual membership from January 1 – December 31)

___ Mr. ___ Mrs. ___ Ms. ___ Miss ___ Dr.

Name _____

Home Address _____

City _____ State _____ Zip _____

Home Phone _____ School Phone _____

School Name _____

School Address _____

City _____ State _____ Zip _____

E-Mail Address _____

School District/Setting _____ AEA _____

School Building/Department _____

Check One: ___ New Member ___ Renewal
Are you an ASCA Member? ___ Yes ___ No
Have you been a counselor for 1 year or less? ___ Yes ___ No ___ N/A

Check type of membership:

- ___ Professional - \$40.00 (please check position)
 - ___ Elementary School Counselor
 - ___ Middle School/Junior High School Counselor
 - ___ High School Counselor
 - ___ MS/JH/HS Counselor
 - ___ K-12 School Counselor
 - ___ College/University Counselor
 - ___ Special Needs/Setting Counselor
 - ___ Other _____

___ Retired - \$20.00

___ Student - \$25.00

Professor Signature (required for student rate)

_____/_____
Professor Institution

Would you like to contribute to support the ISCA Scholarship? Amount _____
Contributions are not tax-deductible.

Make checks payable to ISCA and mail to: Iowa School Counselor Association
6919 Vista Drive
West Des Moines, IA 50266
Phone: 515-282-8192 Fax: 515-282-9117 Email: iowaschoolcounselors@gmail.com
Questions? Contact Sandy Thomson at sthomso@charlescitieschools.org

Payment of dues or other contributions to ISCA are not tax deductible as charitable contributions for income tax purposes. They may, however, be tax deductible as ordinary and necessary business expenses to the extent not allocated to lobbying expenditures. ISCA estimates that the non-deductible portion of your dues for 2018 is 50%.