

Academy Membership Application Form

We welcome your interest and involvement. If you would like to join the Academy, please fill out this form and mail it to the address printed below.

Please select the membership category below that represents your desired membership status and pay the dues amount for that category. Make your check payable to Academy Account and send it to:

Academy for the Study of the Psychoanalytic Arts
c/o Bethann Kalt, Ph.D.
32255 Northwestern Highway, Suite 250
Farmington Hills, Michigan, USA 48334

- Member.....\$ 50.00
- Student Member.....\$ 20.00
- Corresponding Member\$ 25.00
- Supporting Member.....\$100.00
- Sustaining Member.....\$150.00

Please indicate your academic discipline(s) and degree(s):

Is there a particular area of interest or type of involvement you would like to contribute to the Academy?

Please provide the information requested below and indicate what, if any, of your contact information you want to appear in our website (www.AcademyAnalyticArts.org) and/or printed directories.

Publish in Website Directory	Publish in Printed Directory	Do Not Publish in Either Directory	
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*** Questions about membership? Contact: Bethann Kalt, Ph.D. at bethann933@aol.com