

## New Member (Individual) Application Form (Please print or type)

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

### Type of Individual Membership Requested (Membership classifications are listed on page 2):

- |  |   |
|--|---|
| <input type="checkbox"/> Conductive Education Teacher (CET) \$100      | <input type="checkbox"/> Student Conductive Education Teacher (SCET) \$35 |
| <input type="checkbox"/> Related Credentialed Professional (RCP) \$100 | <input type="checkbox"/> Sustaining \$500                                 |
| <input type="checkbox"/> Program Administrators (PA) \$100             | <input type="checkbox"/> Associate \$100                                  |

†Amount Enclosed: \_\_\_\_\_ (PLEASE SEE PAGE 2 FOR IMPORTANT INFORMATION REGARDING PRO-RATION OF DUES)

**Professional Address:** Organization: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Country \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Home Address:** Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Country \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Mailings should be sent to (*check one*):  Professional Address **OR**  Home Address

### Please indicate:

Yes, include my name and information in the membership directory.

*If yes, which address should be listed in the Member Directory?*  Professional Address **OR**  Home Address

No, do not include my name and information in the membership directory.

Please note that ACENA will not share/sell membership information.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date of Submission**

**Please make checks payable to ACENA and mail with your Application Form to:**

**PO Box 7707 Grand Rapids, MI 49510**

Please contact Kasey C. Church, Director of Membership at [kaseygray@acena.org](mailto:kaseygray@acena.org) with any questions.

*For office use only:*

Amount Enclosed: \_\_\_\_\_ Check Number: \_\_\_\_\_ Date Received: \_\_\_\_\_

†Dues are pro-rated depending on when your application is received:

- January 1-September 30 = full dues (\$100)
- October 1-December 31 = 75% pro-ratio (\$25)

**Any member whose dues are not paid on or before January 31 shall be considered in arrears and shall be automatically dropped from membership in ACENA.**

**ACENA MEMBERSHIP CATEGORY CRITERIA & BENEFITS**

		Center	CET	RCP	PA	Student CET	Associate	Sustaining	Honorary Life
C R I T E R I A	Certified Conductor, Conductor-Teacher		⊙						
	Enrolled in Conductor, Conductor-Teacher program					⊙			
	All fulltime employed conductors, program administrators and related credentialed professionals working at Center are currently registered as ACENA individual members	⊙ <sup>1</sup>					⊙		
	Individual			⊙	⊙		⊙	⊙	⊙
	Has signed and submitted an ACENA Membership Application Form for Center	⊙ <sup>2</sup>	⊙ <sup>3</sup>						
	Membership fee	No fee	\$100	\$100	\$100	\$35	\$100	\$500	Waived
	Participate in periodic surveying that ACENA may distribute		⊙	⊙	⊙	⊙		⊙	⊙
	Display the ACENA logo and "An ACENA Center" wording on website; brochures; Facebook site; and annual report	⊙							

		Center	CET	RCP	PA	Student CET	Associate	Sustaining	Honorary Life
B E N E F I T S	May utilize/display the ACENA logo and "An ACENA Center" wording	⊙							
	Contact information displayed on ACENA website CE Directory	⊙							
	Receives one softcopy of ACENA Policy & Procedures Manual	⊙			⊙				
	Receives one softcopy of ACENA Program Practice Manual	⊙	⊙			⊙			
	Center receives one softcopy of IEP materials	⊙							
	Receives one softcopy of Advocacy package materials, including National Conductive Education Day	⊙	⊙		⊙	⊙			⊙
	May post employment advertisements on ACENA website	⊙							
	May vote on all ACENA topics/issues		⊙	⊙	⊙	⊙		⊙	⊙
	May hold elected office		⊙	⊙	⊙			⊙	⊙
	May serve on committees		⊙	⊙	⊙	⊙ <sup>4</sup>		⊙	⊙
	Participate in quarterly ACENA CE Center members conference calls		⊙	⊙	⊙	⊙	⊙	⊙	⊙
	Receives annual statistical report on CE in North America		⊙	⊙	⊙	⊙		⊙	⊙
	Access to a broad and varied network of CE professionals		⊙	⊙	⊙	⊙	⊙	⊙	⊙
	May post to ACENA website employment needed/wanted		⊙			⊙			
	Receives ACENA newsletter		⊙	⊙	⊙	⊙	⊙	⊙	⊙
May participate in annual conference / workshop at ACENA member rate		⊙	⊙	⊙	⊙		⊙	⊙	

**Reference Notes**

<sup>1</sup> For a CE Center to be granted ACENA member status, all fulltime employees (FTEs) who work more than 20 hours each week for 6 months or more in a calendar year must have a current ACENA individual membership. This would include all conductors (CETs), the program administrator (PA) and any related credentialed professionals (RCPs – e.g., physiotherapists). There is no fee for ACENA Center membership.

<sup>2</sup> Center application form includes: contact information; the number of staff (Adm/CET/ Assistant/OT/PT); the number of service hours provided to children and adults annually; the number of children and adults served annually; types of service and, if applicable, the curriculum provided; the presenting condition of students; annual budget and the percentage source of funding ( e.g., 10% foundations; 60% fee for service; 10% state grants, etc); and, name and contact information for the one (1) included individual CET ACENA membership

<sup>3</sup> CET application form includes: contact information, and *eventually*, signoff on an ACENA Conductor Code of Conduct

<sup>4</sup> Student CETs may sit on a subcommittee but not chair one.