

2011-2012 VCRA MEMBERSHIP FORM

(FOR: July 1, 2011 to June 30, 2012)

[] CHECK HERE IF ALL INFORMATION IS THE SAME FROM LAST YEAR- PLEASE PRINT NAME.

In case of a recent name change, please supply your new name and your old name. Thank you.

Name: _____ Birth Month: _____ Day: _____

***Home Information:** Home Phone: (_____) _____

Address: _____

City: _____ State: _____ Zip: _____

E-Mail: _____@_____

****Business Information:** Business Phone: (_____) _____

Business Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Fax Number: (_____) _____

Send Mail To: (Circle One) HOME BUSINESS

To be Printed in Directory: (Circle One) *HOME INFORMATION or **BUSINESS INFORMATION

OMIT _____

Employment Type: (Circle All That Apply) Owner Freelance Reporter

Official Reporter Hearing Reporter Captioner Legislative Reporter

CART Reporter Scopist Proofreader Videographer Teacher*

Student* Other: _____

*If Teacher or Student Which School: _____

Certifications: (Circle All That Apply) RDR RMR RPR CRR

CLVS CMRS CVR CM CSR (State: _____)

CCR (State: _____) Other: _____

Primary Reporting Type: (Circle One) Machine Voice Other: _____

(continued on next page)

2011 - 2012 VCRA MEMBERSHIP FORM (continued)

Transcription Software Used: _____

Support Services: *(Circle All That Apply)* Computer-Aided Transcription Conference Room
Litigation Support Realtime Translation Video Videoconferencing
Captioning Conferencing CART Broadcast Captioning
Other: _____

Membership Dues: *(Please Read Carefully and Check One)*

_____ Professional with CCR - **\$125.00**. Any person actively engaged in the practice of shorthand or voice reporting. *(Voting Membership)* **SELECT THIS IF YOU ARE ALSO RENEWING YOUR CCR.** CCR Number: _____

_____ Professional without CCR - **\$100.00**. Any person actively engaged in the practice of shorthand or voice reporting. *(Voting Membership)* **SELECT THIS IF YOU ARE CURRENTLY NOT A CCR.** If you would like to become a CCR please visit www.vcra.net and download the CCR application.

_____ Associate - **\$60.00**. Any person who has an active interest in the field of shorthand or voice reporting and are not eligible for professional membership. *(Non-Voting Membership)*

_____ Student - **\$35.00**. Any person enrolled in a school, college or home-study course of shorthand or voice reporting. *(Non-Voting Membership)*

Special Interests:

_____ I am interested in serving on the VCRA Board. _____ I am interested in being a mentor.
_____ I am interested in serving on a committee. _____ I am interested in being mentored.
Special Interests (for committee assignment): _____

Payment:

_____ Check or Money Order Enclosed Payable to VCRA.
_____ VISA _____ MASTERCARD _____ AMERICAN EXPRESS _____ DISCOVER

_____ Account Number _____ Expiration Date

Name and Address for Card: *(Please Circle One)* HOME BUSINESS
IF DIFFERENT PLEASE PROVIDE CORRECT NAME AND ADDRESS INFORMATION:

_____ **Cardholder Signature** _____ **Date**

Please send payment along with this form to: VCRA, PO Box 3325, Portsmouth, VA 23701