



# Southwest Riverside County Chapter

Address: 32605 Temecula Parkway, Suite 207, Temecula, CA 92592

Web: [www.swrc-camft.org](http://www.swrc-camft.org)

Email: [southwestriversidecountycamft@gmail.com](mailto:southwestriversidecountycamft@gmail.com)

Telephone: (951) 595-7186

Name and Degree: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Business Name: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Clinical License # \_\_\_\_\_ Is Your License In Good Standing? Yes (  ) No (  )

Are You a Member of Statewide CAMFT? Yes (  ) No (  )

CAMFT Member # \_\_\_\_\_

*\*\*Must be a member of statewide CAMFT to join the local chapter, (unless Affiliate member)*

CHECK ONE:  New Member  Renewal

## MEMBERSHIP CATEGORIES (CHECK ONE)

<input type="checkbox"/> Clinical (Licensed)	(Before February 1st) <b><u>\$45.00</u></b>	(After February 1st) <b><u>\$55.00</u></b>
<input type="checkbox"/> Pre-licensed (Trainee, Intern, Social Worker Associate)	(Before February 1st) <b><u>\$30.00</u></b>	(After February 1st) <b><u>\$35.00</u></b>
<input type="checkbox"/> Associate (Licensed in a related mental health field)	(Before February 1st) <b><u>\$45.00</u></b>	(After February 1st) <b><u>\$55.00</u></b>
<input type="checkbox"/> Affiliate Practitioner in another field (e.g., RN, Attorney)	(Before February 1st) <b><u>\$45.00</u></b>	(After February 1st) <b><u>\$55.00</u></b>

## MAKE CHECKS PAYABLE TO *SOUTHWEST RIVERSIDE COUNTY CHAPTER OF CAMFT*

Send this form with check to: 32605 Temecula Parkway, Suite 207, Temecula, CA 92592,

### ***Benefits of Membership Include:***

- Networking
- Staying connected to other therapists
- Low cost advertising
- Developing peer relations and being less isolated
- Giving and receiving consultation and referrals
- Educational opportunities

*Southwest Riverside County Chapter of CAMFT*

*Bring another CAMFT member with you!! Let's keep building our Chapter!!*