

# Minnesota Women *in* Psychology Membership Registration for 2009-2010

Last Name:

First Name:

M.I.:

Professional Abbreviations following name (if applicable):

Email Address:

## Home Information

Home Address:

Home Phone:



## Employment Information

Place of Employment:

Office Address:

County:

Office Phone:

Office Fax:

Web Site:

2<sup>nd</sup> Place of Employment:

2<sup>nd</sup> Office Address:

2<sup>nd</sup> County:

2<sup>nd</sup> Office Phone:

2<sup>nd</sup> Office Fax:

2<sup>nd</sup> Web Site:

Preferred Mailing Address:  Office  Home

MWP occasionally sells its mailing list to its members or others for uses consistent with MWP's purpose. Check this box if you do not want your name included in such mailing list requests.

## Education Information

Degree:

Discipline:

School:

I am currently a student at:

## Membership Categories

**Regular Member**

Holds either a Master's or Doctoral Degree in Psychology from a regionally accredited institution or have been licensed as a psychologist in Minnesota. Persons with a similar or equivalent training in a related field are also welcome to membership with MWP

**Affiliate Member**

Any individuals interested in promoting the mission of MWP. This category includes students who do not yet have a master's degree. Affiliate members do not vote or serve on the Executive Committee, but are welcome to participate in all other ways.

**Dues for both regular and affiliate members are on a sliding scale based on individual gross annual income.**

**\$80** Income over \$50,000  **\$65** Income from \$30,000-50,000  **\$50** Income under \$30,000  **\$30** Student/minimally employed  \$\_\_\_\_\_ Additional Donation

Printed Hardcopy of MWP Quarterly Newsletter:  \$5

Printed Hardcopy of the MWP Directory:  \$5

**How did you find out about MWP?**

School  Web Site

Referred by MWP Member: \_\_\_\_\_

Mail this form with your check to: MWP, 5244 114<sup>th</sup> Ave, Clear Lake MN 55319

Your registration must be received by OCTOBER 15, 2009, for your information to be included in the Printed MWP 2009/2010 Directory.

## Specialties

- ADD/ADHD
- Addictions/Substance Abuse
- Adjustment Problems/Stress
- Adoption
- Anger
- Anxiety
- Attachment Issues
- Bipolar Disorder
- Body Image
- Chronic Mental Illness
- Co-Dependency
- Compulsive Behavior
- Conflict/Resolution
- Death and Dying
- Depression
- Developmental Disabilities
- Disability Issues
- Dissociative Disorders
- Domestic Abuse
- Eating Disorders
- Family of Origin Issues
- Grief and Loss
- Infertility/Fertility
- Learning Disabilities
- Money Issues
- Multicultural Issues
- Obsessive Compulsive Disorder
- Parenting
- Personality Disorders
- Physical/Chronic Health Issues
- Postpartum Depression
- Posttraumatic Stress Disorder
- Relationship Issues
- Religious/Spiritual Concerns
- Self-Esteem
- Sexual Abuse
- Sexual Orientation/GBLT
- Sexual Violence/Rape
- Shame
- Sleep Disorder
- Trauma
- Work Issues

## Services

- Art Therapy
- Brief Therapy
- Career Guidance
- Cognitive Behavioral Therapy
- Couples Psychotherapy
- Dialectic Behavior Therapy
- EMDR
- Family Psychotherapy
- Forensic Evaluation
- Group Therapy
- Hakomi
- Health Psychology
- Hypnotherapy
- Individual Psychotherapy
- Meditation
- Mind/Body Work
- Play Therapy
- Psychodynamic Therapy
- Psychological Testing/Evaluation
- Sex Therapy
- Spiritual Guidance
- Supervision/Consultation

## Ages Served

- Infant/Toddler (age 0-3)
- Child (age 3-12)
- Adolescent (age 13-17)
- Adult (age 18-64)
- Elder (age 65+)

## Languages

- American Sign Language
- Hindi
- Hmong
- Russian
- Arabic
- Chinese
- Czech
- English
- French
- German
- Japanese
- Korean
- Somali
- Spanish
- Urdu

## Supervisor for:

- LICSW
- LMFT
- LPC
- Master's and Doctoral Level LP
- Master's Level LP only

**Mail this form with your check to:**

**MWP**

**5244 114<sup>th</sup> Ave**

**Clear Lake MN 55319**

**Or to pay by credit card or through a PayPal account**

**email [WmPsychlgy@aol.com](mailto:WmPsychlgy@aol.com) and request an electronic invoice.**

**Please include the payment category/total of payment in the request.**

**Membership Dues are on a sliding scale.**

- \$80 *Income over \$50,000*
- \$65 *Income from \$30,000-50,000*
- \$50 *Income under \$30,000*
- \$30 *Student/minimally employed*

*With a paid membership, you will receive access to the digital Quarterly Newsletter and be included in the on-line membership directory and have full use of the directory. You also have the option of receiving a printed copy of the directory and newsletter for an extra \$5 each.*

- \$ 5 *Printed Copy of the Quarterly Newsletter by US Mail*
- \$ 5 *Printed Copy of the MWP 2009-10 Membership Directory (to be distributed 1/1/10)*
- \$ *Additional Donations Welcome*

\$ \_\_\_\_\_ **Total Payment to MWP**