



# The Society for Descriptive Psychology

## APPLICATION FOR MEMBERSHIP

Name (circle one title, or none): Ms., Mr., Mrs., Dr.

Date: \_\_\_\_\_

\_\_\_\_\_

Last	First	Middle
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Home Address: \_\_\_\_\_ Business Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone: Mobile (\_\_\_\_\_) \_\_\_\_\_ Business (\_\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_\_) \_\_\_\_\_

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

Occupation/Employment:  
\_\_\_\_\_

Heard about the Society via \_\_\_\_\_

\_\_\_\_\_ I enclose \$50.00 for one year of **individual membership** in the Society for Descriptive Psychology, which will include the introduction to Descriptive Psychology, "The Behavior of Persons" by Peter Ossorio, reduced fees for the annual conference, and a publication benefit if approved for the membership year of which I am a member.

\_\_\_\_\_ I enclose \$85 for one year of **family membership** for all members having resided together. Each family member is counted as an individual member and gets the benefits of membership described above, including reduced conference fees. However, the family as a whole receives only one publication benefit to be shared by all. Family members: \_\_\_\_\_

\_\_\_\_\_ I enclose \$10.00 for one year of **student membership**, which includes the benefits of a regular membership at a discount for full-time students who are employed half-time or less.

Checks should be made payable to: Society for Descriptive Psychology. Mail it with this application to:  
Karen Moser, Bookkeeper  
Society for Descriptive Psychology  
11941 West 77<sup>th</sup> Dr  
Arvada, CO 80005-3331