



International Society for the Study of Trauma and Dissociation

2019 ISSTD Membership Application

Section 1: Enter Your Contact Information Here

Name: _____

Credentials: _____

Organization: _____

Business Address: _____

City/State/Province: _____

Postal Code/Country: _____

Business Phone: _____

Business Fax: _____

E-mail: _____

Mailing Address: _____

City/State/Province: _____

Postal Code/Country: _____

My Primary Address is: Business Mailing

Section 2: Preferences

Online Membership Directory

Full Listing (Includes all contact information)

No Listing (Excludes any listing from the directory)

Find-A-Therapist Directory

Post my information in the public area of the ISSTD Website for people seeking a therapist. I agree that my contact information may be distributed to potential clients.

Section 3: Professional Information

Please circle your current professional discipline(s):

Psychology Psychiatry Medicine Nursing

Social Work Counseling Psychotherapy

Other _____

Section 5: Pricing Information (select one)

Pricing Valid from 01/01/2019 through 12/31/2019

Includes ISSTD News, access to ISSTDWorld and the electronic version of the Journal of Trauma & Dissociation

Regular Member - \$237 Student Member - \$115

Retired Member - \$106 International* (see below)

Emerging Professional Member - \$142

Section 6: Student Member Information

School? _____

Degree? _____

Anticipated Graduation Year? _____

Section 7: Optional Items

Print Copy *Journal of Trauma & Dissociation* \$27.00

Optional General Fund Donation \$_____ *Thank you!*

Section 8: Payment Options

(a) Please Make Checks Payable to ISSTD

(b) Pay with Credit Card



Credit Card Type: _____

Credit Card #: _____

CVV (3 or 4 Digits): _____

Expiration Date: _____

Total Amount: _____

I, _____, authorize ISSTD to charge the amount stated above.

Remit Checks to:

ISSTD || 1420 New York Avenue NW 5th Flr || Washington, DC 20005

Remit Credit Card Payments to:

(a) ISSTD || 1420 New York Avenue NW 5th Flr || Washington, DC 20005

(b) Fax to (202) 747-2864

Additional Information

Membership Cycle: ISSTD Membership is now Anniversary based. This means that membership will be valid for one year from the join date for all new/returning members.

***International Members:** For members who reside outside of the US and Canada fees may be based on a sliding scale if you reside in a Country that is classified by the World Bank as an Upper Middle Income, Lower Middle Income or Low Income Country. Please contact us at membership@isst-d.org if you wish to join using the sliding scale.

By applying for or renewing my membership in ISSTD, I agree to abide by the ISSTD Code of Conduct, a copy of which is available on the ISSTD website.

Visit us Online at www.isst-d.org