

Student Membership Application

Name **Informatio** Home Address City State Zip **Membership** Home Phone Cell Phone Email Date of Birth Chiropractic College **Expected Graduation Date** ☐ I would like to sign up for 1 year MCPA Student Membership for \$10 ☐ I would like to sign up for 3 year MCPA Student Membership for \$25 Charge \$_____ to my Check #_ Cash \$ __ ☐ American Express Make checks payable to: ☐ Discover **MCPA** ■ Master Card PO Box 104446 Jefferson City, MO 65110-4446 □ Visa Credit Card Number **Expiration Date** Security Code Signature

Benefits of MCPA Student Membership

 Free MCPA Annual Summer Convention Registration For All MCPA Members

(members must be in good standing, register by Early Bird Deadline, and adhere to all policies including cancellation policy)

- Legal & Insurance FAQs Available On Members Only Website Forums
- Members Only Pricing
 On Business Resources
 & Webinars
- Full-Time Professional Lobbyist
- Members Only
 Website With Access
 To All Of Your Event
 Registration, Membership,
 MC PAC Donations,
 & Business Center
- Important Business & Legal Forms Available On Members Only Website
- Local District Meetings& Social Activities
- Members Only Discounts
 On Seminars
- Full-Time
 Professional Staff