



MEMBERSHIP APPLICATION

Florida Court Reporters Association

*Name (Please print) _____ NCRA # _____ NVRA # _____

*Company _____ Owner Co-owner Manager

*Mailing Address _____ Website: _____

*City/State/Zip _____

*Telephone: Home (_____) _____ Office (_____) _____ FAX (_____) _____

CHECK ONE: OK to publish home phone number in directory. DO NOT publish home phone number.

*Email address _____ Secondary Email Address _____

*METHOD OF REPORTING: Stenographic Voicewriter Gregg Pittman Other _____

*TYPE OF REPORTER: Freelance Official Deputy Official Captioner Federal Teacher Student Other _____

*DESIG: CSR [List State(s) other than FL] _____ FAPR FPR FPR-C RPR RDR CMRS RMR CLVS CRI CRR CPE

*Asterisk indicates required information.

I make application for Membership as a: (CHECK ONE)

PARTICIPATING MEMBER\$250.00

Open to anyone engaged in active practice of official or general court reporting by either stenographic or voicewriter method. (Please indicate method above.)

PAYMENT PLAN AVAILABLE

*Pre-Authorized Payment Plan Attached
(Participating Members Only)

STUDENT MEMBER\$45.00

Open to any student of shorthand reporting who is endorsed by a court reporting training program instructor or director.

RETIRED MEMBER\$60.00

Open to any participating member in good standing who has retired from the active practice of shorthand reporting.

ASSOCIATE MEMBER \$125.00

This category is open to the following (please check one):

- Teachers of shorthand reporting
- Individuals officially connected with a school or college conducting shorthand reporting course - *School Name & Location* _____
- Non-member individuals retired from active shorthand reporting
- Non-reporters professionally associated with or employed by a member of FCRA whose application is endorsed by a participating member in good standing (*please print sponsoring member's name below where requested*)
- Anyone qualifying for Participating membership, but residing outside of Florida - State of Residence _____

VENDOR MEMBER\$500.00

Open to any firm or corporation engaged in selling products or services to FCRA members.

PRO BONO: Are you interested in donating time to the Pro Bono Program?

Yes No

FLORIDA MANUAL: The guide to court reporting in Florida — sample forms, guidelines, and rules of court. Cost for members: \$75.00. Subscription to updates: \$25.00.

MEMBERSHIP DIRECTORY: Searchable geographical and alphabetical members' listing on our website.

Membership year runs one year from date of enrollment. Dues payments are deductible by members as an ordinary and necessary business expense. In accordance with Section 6033(e) (2)(A) of the Internal

For Administrative Use Only

Date Rec'd _____ Ref # _____ Amount _____

Date Approved _____ Computer _____

I hereby make application for membership in the Florida Court Reporters Association and pledge myself, if accepted, to abide by the requirements of the Bylaws and Code of Professional Responsibility of the Association as they are now and as they may be amended in the future.

I understand that all applications are subject to review and approval by FCRA and that I must be a stenographic or voice reporter to join. All applicants must be sponsored by an FCRA member in good standing per FCRA bylaws. FCRA reserves the right to revoke the membership of anyone using a methodology other than stenographic or voice.

Signature of Applicant _____ Date _____

Name of Sponsoring Member (Please print or type) _____

How did you hear about FCRA? Code: _____ Other: _____

PAYMENT ENCLOSED FOR:

TOTAL ENCLOSED: \$ _____

Check # _____ MasterCard VISA AmEx

Account # _____

Exp. Date: _____

CVV: _____

Amount to charge: \$ _____

Authorized Signature _____

Billing Address: Same as above

Address: _____

City/St/Zip: _____

Make check payable to FCRA and mail to FCRA Headquarters,
6116 SE Turn Leaf Trail, Hobe Sound, FL 33455
Phone: 844-GET-FCRA (438-3272)
admin@fcraonline.org (for charge payments only)
www.fcraonline.org