

FOR OFFICE USE: _____

FICPA MEMBERSHIP APPLICATION

YOUR MEMBER PROFILE

Name: _____

Address: _____

City/State/ZIP: _____

Firm or Employer: _____

Title: _____

Address: _____

City/State/ZIP: _____

P.O. Box (if applicable): _____ P.O. Box ZIP: _____

Date of Birth: ____ / ____ / ____ Are you a Partner/Owner of this firm? Yes No

Referred By: _____

(If applicable, name of FICPA member who referred you)

Join online at www.ficpa.org/joinus, or return this form with your check.

YOUR COMMUNICATION PREFERENCES

Firm Phone: (____) _____

Please contact me via this phone.

Home Phone: (____) _____

Please contact me via this phone.

Firm Fax: (____) _____

Please contact me via this fax.

Home Fax: (____) _____

Please contact me via this fax.

Direct Line: (____) _____

Please contact me via this phone.

E-Mail: _____

Please contact me via this E-Mail.

Are you a Florida-licensed CPA? Yes No

Licensure Date: ____ / ____ / ____

Licensure Number: _____

Are you licensed in another state? Yes No

State of original Licensure: _____

(If other than Florida)

Licensure Date: ____ / ____ / ____

Licensure Number: _____

Dues Payment: \$ _____

Florida CPA/PAC (voluntary): \$ 25

FICPA Educational Foundation (voluntary): \$ 50

TOTAL: \$ _____

Bill me separately for:

CPA/PAC: \$ _____

Educational Foundation: \$ _____

METHOD OF PAYMENT

Charge my:



_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|

Card Validation Code: _____

Name as it appears on card: _____

Signature: _____ Exp Date: _____

Check (Please make check payable to FICPA)

I hereby certify that the information on this application is correct to the best of my knowledge and belief; that I have never been convicted by any court or other body of a felony or misdemeanor, under the laws of a state or of the United States or in any jurisdiction; and that I have never been suspended or expelled from any professional organization and I agree to abide by the Articles of Incorporation and Bylaws of the FICPA as they exist now or may be modified in the future. (If you have been convicted, suspended, or expelled, please attach statement giving details).

Signature: _____ Date: _____

What Category Am I In?

Licensed CPAs are invited to join as Voting or Non-Resident Members. Professionals who are not licensed still may be eligible for membership in Student, Associate, Non-CPA Accounting Educator, International Affiliate or Professional Affiliate categories.

Please check the appropriate category.

Voting Member: Any CPA holding a valid CPA certificate issued by the Florida Board of Accountancy or of any state or territory of the United States or of the District of Columbia, who works or resides in Florida, whether or not engaged in the public practice of accountancy. **Dues are based on the number of years certified. Dues amounts listed are valid from 12/01/09 to 03/31/10.**

Partner/Owner

10 years or more	\$140	\$280
3 - 10 years	\$125	\$250
Fewer than 3 years	\$95	\$190

Staff or Industry

10 years or more	\$133	\$265
3 - 10 years	\$125	\$250
Fewer than 3 years	\$95	\$190

Government or Education

10 years or more	\$113	\$225
3 - 10 years	\$105	\$210
Fewer than 3 years	\$88	\$175

Non-Resident Member: Any person who is a Certified Public Accountant of any state or territory of the United States or the District of Columbia and is domiciled outside the state of Florida. **Dues: \$180**

\$90

Student Member: Any person enrolled in a college or university who is not eligible for any other membership category. **Dues: \$30**

Associate Member: Any non-CPA professional engaged in an accounting capacity, supervised by an FICPA Voting Member on a substantially full-time basis, and sponsored by said member. Associate memberships belong to the firm of the sponsoring member and such membership shall be automatically resigned in the event of a change in employment status and/or certification. **Dues: \$120**

\$60

Non-CPA Accounting Educator Member: Any non-CPA individual engaged in accounting education on a full-time basis in the State of Florida. **Dues: \$120**

\$60

CPA Accounting Educator Member: Any CPA individual engaged in accounting education on a full-time basis in the State of Florida. **Dues: \$120**

\$60

International Affiliate Member: Any person who is a citizen of another country and does not hold a CPA certificate issued by a U.S. jurisdiction, but who does hold a valid certificate as a chartered accountant or its equivalent. In addition, an eligible International Affiliate must be a member of at least one association belonging to the International Federation of Accountants (IFAC). **Dues: \$180**

\$90

Professional Affiliate Membership: Any person who is not a CPA, but has a direct interest in the profession of the Certified Public Accountants. Affiliate members must provide a letter of recommendation by an FICPA Voting Member and are eligible for chapter membership and may not vote, hold office, or serve on committees. Any individual eligible for another category of membership shall not be eligible for Non-CPA Affiliate Membership. **Dues: \$310**

\$155

Retired Membership: **Dues: \$60**
(Contact Member Service Center for details.)