

MCRA Membership Application

Date Approved _____

NOTICE: Please print this application, fill it out in full, and mail it to the MCRA Vice-President along with your check.

****YOU MUST HAVE AN ENDORSEMENT FOR THE APPLICATION TO BE APPROVED****

A. PLEASE IDENTIFY YOURSELF

Mr.Mrs.Ms.Miss. _____ First _____ Middle _____ Last _____

Female ____ Male ____ Date of Birth _____

Address _____

Home Phone _____

City/State/Zip _____

Cell Phone _____

Workplace Name _____

Work Phone _____

Street Address _____

Work Phone _____

Fax _____

City/St/Zip _____

County _____

Date Started Reporting _____

E-Mail _____

Web Site _____

Nickname for Convention Badge _____

Previous Member of MCRA - ____ No ____ Yes If yes, by what name? _____

B. MEMBERSHIP TYPE

- ____ - Participating Membership - Dues \$55.00
 - ____ - Out of State Membership - Dues \$55.00
 - ____ - Associate Membership - Dues \$20.00
 - ____ - Student Membership - Dues \$25.00
 - ____ - Instructor Membership - Dues \$25.00
- _____ - Reinstatement Fee \$20.00
- Certifications ____ CPE ____ CRI

C. REPORTERS

Primary Reporter Type ____ Freelance ____ Circuit ____ Chancery ____ County/Youth ____ Federal

(Check Only One) ____ Worker's Comp ____ Public Service ____ Other _____

Primary Shorthand Type ___ Machine ___ Pen Writer ___ Steno Mask ___ Other _____
(Check Only One)

Primary Cat System _____ Pen Writers, Software _____

Certifications ___ CSR # _____ ___ RPR ___ RMR ___ RDR ___ CLVS

(Check All That Apply) ___ CRR ___ CMRS ___ CPE ___ CRI

Reporter Services ___ Computer-Aided Transcription ___ Conference Room ___ Litigation Support

(Check All That Apply) ___ Video ___ Realtime ___ Closed Captioning ___ Notary

NCRA Member ___ Yes NCRA # _____ ___ No

D. OTHER OCCUPATIONS

___ Instructor ___ Proofreader ___ Scopist ___ Transcriptionist ___ Attorney

___ Paralegal ___ Supplier/Vendor ___ CLVS ___ Other _____

E. STUDENTS AND INSTRUCTORS

Instructor's Name _____ School _____

Address _____

City/State/Zip _____

Phone Number _____

F. ENDORSEMENT BY A REPORTER MEMBER OF MCRA (Please print and sign your name)

Endorser _____
