



Join Online at: www.rehabpro.org/membership

Renew Online at: www.rehabpro.org/members/membership.asp
(My Transactions, Pay Open Orders)

Referred by:

Personal Contact Information

Name

Street Address

City State ZIP/Postal Code

Phone Fax

E-mail Address

College/University

University Address

City State ZIP/Postal Code

Anticipated Graduation Date

Copy of Student ID is attached

Do not share my e-mail address(es) with industry/practice-related third-party requesters.

Membership Category

Student \$15/yr.

Membership qualifications are outlined at www.rehabpro.org/membership.

Membership Dues \$ _____

Course of a Lifetime Starts with IARP®

Chapter Membership

Students are encouraged to join their local IARP Chapter if there is one available. Chapter Membership is required for Professional IARP Memberships, but not required for students.

New: Student Chapter Memberships are FREE.

- Alabama
- Arizona
- California
- Canada
- Carolinas (NC, SC)
- Chesapeake (DE, MD, DC)
- Florida
- Georgia
- Hawaii
- Illinois
- Kansas
- Louisiana
- Michigan
- Mississippi
- Nebraska
- Nevada
- New England (ME, VT, NH, MA, CT, RI)
- New Jersey
- New York
- Ohio
- Oregon
- Pennsylvania
- Tennessee
- Texas
- Virginia
- Washington
- Wisconsin

Optional Chapter Dues

\$ _____

Additional Chapter Dues

\$ _____

Membership Promotion Code

Membership Application Worksheet

Membership Dues	\$	
Optional Chapter Dues	\$	
Additional Chapter Dues (if applicable)	\$	
Gale Gibson Memorial Educational Scholarship*	\$	
SS-VE Government Affairs Fund Contribution**	\$	
IARP Legislative Fund Contribution***	\$	
Total****	\$	USD

* The Gale Gibson Memorial Educational Scholarship is comprised of non-tax-deductible contributions that support educational scholarships for rehabilitation professionals.
 **The Social Security Vocational Expert Government Affairs Fund is comprised of non-tax-deductible contributions that support federal government relations on behalf of the SS-VE section.
 ***The IARP Legislative Fund is comprised of non-tax-deductible contributions that support federal government relations on behalf of the entire membership.
 ****No part of IARP dues are tax deductible as a *charitable expense*. According to provisions of the Omnibus Budget Reconciliation Act of 1993, 100% of IARP member dues *may be deductible as a business expense*.

Policy Agreement

I have read and grant consent to use my data as outlined in the [privacy policy](#).

By signing this application, I verify that the information provided is accurate, that I meet the requirements of the membership type I have chosen, and pledge to abide by the professional Standards & Ethics of IARP published online at www.rehabpro.org/standards

Signature

Date

Mail or Fax Completed Application To:
 IARP Membership
 1000 Westgate Drive Suite 252
 St. Paul, MN 55114
 Phone: 651-379-7290
 Fax: 651-290-2266
www.rehabpro.org

Payment Method

*If payment is needed please mail or fax submissions, per PCI Compliance Standards.
 If no payment is needed please email this application to membership@rehabpro.org.*

- Check (payable to IARP)
 Visa MasterCard AMEX

Card Number

Expiration Date

Security Code

Signature

Cardholder Name

(For office use only)

initials		fin.
date		
CK/CC		
amt. paid		
bal. due		

If paying by credit card, all fields are required. Per PCI compliance, please do not send credit card information via email to protect your information.