



MEMBERSHIP FORM

To join ICDL, visit www.icdl.com or complete the form below and mail it, with payment to
ICDL Membership, 4938 Hampden Lane, Suite 800, Bethesda, MD 20814

CONTACT INFORMATION

Name

Organization (If applicable)

Address

City, State, Zip/Postal Code, Country

Email address (membership confirmation will be sent here) telephone number

MEMBERSHIP CATEGORY

<input type="checkbox"/> Professional: \$50.00	<input type="checkbox"/> Professional Plus: \$80.00
<input type="checkbox"/> Parent: \$35.00	<input type="checkbox"/> Supporting: \$150.00
<input type="checkbox"/> Student: \$35.00	
<input type="checkbox"/> Organizational \$200.00 Name of Organization: _____	

(Please include the name of a contact person for your organization in the contact information above.)

Additional Donation supporting the following initiative(s):

<input type="checkbox"/> Website & Newsletter (\$_____)	<input type="checkbox"/> Training and Education (\$_____)	<input type="checkbox"/> Networks & Directory (\$_____)
<input type="checkbox"/> Publications (\$_____)	<input type="checkbox"/> Research (\$_____)	<input type="checkbox"/> Infant Mental Health (\$_____)

PAYMENT INFORMATION

Membership: \$ _____ Donations: \$ _____ Total: \$ _____

Payment Method Visa MasterCard Check Enclosed Purchase Order # _____

Credit Card Number Expiration Date

Billing Address if different from above: _____

DIR®/Floortime™ Directory

The Interdisciplinary Council on Developmental and Learning Disorders (ICDL) is developing a directory of individuals with an interest in DIR®/Floortime™.

Please check here if you DO NOT wish your name listed in the Directory.

My interest in DIR®/Floortime® is in my role as a (check all that apply)

Professional Parent

Profession

<input type="checkbox"/> Early Childhood Education	<input type="checkbox"/> Nursing	<input type="checkbox"/> Pediatrics
<input type="checkbox"/> Special Education	<input type="checkbox"/> Occupational Therapy	<input type="checkbox"/> Speech/Language Pathology
<input type="checkbox"/> Elementary/Secondary Education	<input type="checkbox"/> Physical Therapy	<input type="checkbox"/> Social Work
<input type="checkbox"/> Music and/or Dance Therapy	<input type="checkbox"/> Psychiatry	<input type="checkbox"/> Other _____
<input type="checkbox"/> Neurology	<input type="checkbox"/> Psychology	

ICDL MEMBERSHIP BENEFITS:

- Become part of a unique national and international interdisciplinary effort to improve the care of infants, children and families with special needs
- Attend annual meetings at reduced members only registration fee
- Purchase ICDL Publications and the ICDL Training Videotapes at members only discounted prices
- Have access to the online version of the *Journal of Developmental Processes*
- Receive a hard copy of the Best Practices Newsletter
- Get advanced email notification of ICDL conferences, new publications and special initiatives.

MEMBERSHIP CATEGORIES AND FEES

- **PROFESSIONAL MEMBERSHIP**, \$50 per year. Receive all of the benefits listed above.
- **PARENT MEMBERSHIP**, \$35 per year. Receive all of the benefits listed above.
- **STUDENT MEMBERSHIP**, \$35 per year for full-time students only. Receive all of the benefits listed above.
- **PROFESSIONAL PLUS MEMBERSHIP**, \$80 per year. Receive all of the benefits listed above, **plus** a hard copy subscription to the *Journal of Developmental Processes*.
- **SUPPORTING MEMBERSHIP**, \$150 per year. Receive all of the benefits listed above, **plus** a hard copy subscription to the *Journal of Developmental Processes*.
- **ORGANIZATIONAL MEMBERSHIP**, \$200 per year. Receive all of the benefits listed above, plus the opportunity to register four members of your organization at the member's only registration fee, a hard copy subscription to the *Journal of Developmental Processes*, and an additional 20% discount on all ICDL publications and videotapes. For more information on this membership category, contact Susan@ICDL.com.

WWW.ICDL.COM