

## 2025 Student Member Application

| A. Student information (please print)                               |                 | C. Choose your option   |                        |                          |
|---|-----------------|---|------------------------|--------------------------|
| I am a: ☐ Stenographic reporter/captioner student ☐ Scopist student |                 | Enclose payment in full.  |                        |                          |
| NAME  |                 | ☐ \$55.00 annual membership   |                        |                          |
| NAME  |                 | ☐ Visa ☐ MasterCard   | ☐ Discover             | ☐ American Express       |
| NICKNAME FOR BADGE  |                 | If a check payment is mailed, it must be drawn on a U.S. bank in U.S. funds. Checks returned unpaid by your bank for any reason will cause NCRA to add a <b>return check fee of \$30</b> to your membership balance.  |                        |                          |
| STREET ADDRESS  |                 | add a return check fee or \$3   | <b>o</b> to your membe | isilip balalice.         |
| CITY  |                 | ACCOUNT NUMBER  |                        |                          |
| STATE   | ZIP/POSTAL CODE | EXPIRATION DATE   |                        | SECURITY CODE            |
| COUNTRY   |                 | BILLING ZIP CODE  |                        |                          |
| HOME PHONE  | CELL PHONE      | SIGNATURE   |                        |                          |
| EMAIL ADDRESS   |                 | Your signature acknowledgin   | g that you have i      | read the statement below |
| Gender □ Female □ Male □ Nonbinary                                  |                 | is required to initiate your m  | embership.             |                          |
| Birth date:   |                 | Members of NCRA are required to adhere to NCRA's Code of Ethics. If, as a member, you violate NCRA's Code and your NCRA membership is suspended or revoked, that information shall be published in the <i>JCR</i> or other NCRA publications. I will abide by the NCRA Code of Professional Ethics and Constitution and Bylaws. I agree that I support the purposes and objectives of NCRA. I verify that the information on this |                        |                          |
| Have you ever been a member of NCRA? ☐ Yes ☐ No                     |                 |   |                        |                          |
| If yes, under what name?  |                 |   |                        |                          |
| B. School information   |                 | provided application is correct   | t.                     |                          |
| PRINT INSTRUCTOR'S OR SCHOOL OFFICIAL'S N                           | AME             | SIGNATURE   |                        | DATE                     |
| INSTRUCTOR'S OR SCHOOL OFFICIAL'S SIGNATURE (OPTIONAL)              |                 | Note: Annual membership will expire on December 31, 2025. NCRA dues may be deductible as an ordinary business expense, but not as a   |                        |                          |
|   |                 | charitable contribution. The no   |                        |                          |
| NAME OF SCHOOL  |                 | portion of your 2025 dues is 9.   | 15%.                   |                          |
| STREET ADDRESS  |                 | Join today!   |                        |                          |
| CITY  |                 | Online: NCRA.org/join using   |                        |                          |
|   |                 | Visa, MasterCard, Discover,   | or American Exp        | ress                     |
| STATE   | ZIP/POSTAL CODE |   |                        |                          |
| PHONE   |                 | Save the completed form and send via:   |                        |                          |
|   |                 | Email: membership@ncra.org   Fax: 703-391-0629  |                        |                          |
|   |                 | Mail: National Court Reporters Association,   |                        |                          |
|   |                 | 12355 Sunrise Valley Drive, Suite 610, Reston, VA 20191 <b>Questions?</b> Please email membership@ncra.org  |                        |                          |
| EMAIL ADDRESS   |                 |   | embersinp@ncra         | 1.019                    |
|   |                 | or call 800-272-6272.   |                        |                          |