

Wyoming Chiropractic Association

2011 WCA Contacts Update Form

We at the WCA ask everyone to please complete this first form to help us stay in touch with all chiropractors licensed in Wyoming. If you wish to apply/renew your WCA membership, also complete the second form below. We encourage you to support through membership. Your information is completely confidential and will not be released without your consent.

Doctor's Full Name:	<input type="text"/>
Clinic Name:	<input type="text"/>
Mailing Address:	<input type="text"/>
City, ST ZIP:	<input type="text"/>
Clinic Phone (xxx-xxx-xxxx):	<input type="text"/>
Clinic Cell (xxx-xxx-xxxx):	<input type="text"/>
Clinic FAX(xxx-xxx-xxxx):	<input type="text"/>
Email Address:	<input type="text"/>

2011 Membership Application/Renewal Form

By submitting this application and dues for membership in the Wyoming Chiropractic Association, I, the applicant, agree to uphold the ethics and laws of Chiropractic in the state of Wyoming and to remain in good standing with the WCA by timely payment of dues as set by the membership. Dues are deductible as an ordinary business expense.

Application/Renewal Date (mm/dd/yy):	<input type="text"/>
WY State License Number:	<input type="text"/>
Year Graduated (yyyy):	<input type="text"/>

Applying/Renewing as (check one below):

Student: \$25	<input type="checkbox"/>
First Year Graduated: \$0	<input type="checkbox"/>
Second Year Graduated: \$200	<input type="checkbox"/>
Continuing: \$475 (\$400 if paid by 3/1/11)	<input type="checkbox"/>
(As a Continuing Membership, I elect to contribute \$25 of my dues to the WCA PAC):	<input type="checkbox"/>
I am interested in:	
serving on WCA committees (Y/N)	<input type="checkbox"/>
serving on WCA Board (Y/N)	<input type="checkbox"/>
contributing to WCA newsletter (Y/N)	<input type="checkbox"/>

Membership in the WCA is a valuable way to unite your voice with other chiropractors in Wyoming, to work for common legislative good, to grow and develop your practice and to associate with your fellow practitioners. Please complete these forms and mail this paperwork, with a check in the amount appropriate for the marked membership type, to:

Wyoming Chiropractic Association
c/o Bob Wilkins, Executive Director
1740H Dell Range Blvd, #400
Cheyenne, WY 82009

For further information, please call (307) 315-2265 or email execdir@wochiroassociation.com

Notice of New Schedule for 2011 Membership Dues and Seminar Fees

Due to changes in the WCA by-laws, membership dues and seminar fees have been separated. Starting January 1, 2011, the annual continuing membership dues are \$475. Continuing membership may take a \$75 discount on payments (net \$400) sent in on or before March 1, 2012. Several special membership categories are also available but not subject to the early payment discount: Student membership (\$25 annual dues), First year after graduation membership (\$0 annual dues), and Second year after graduation membership (\$200 annual dues). Spring seminar (12 hrs) fees will be \$450 (\$225 for WCA members) and fall seminar (8 hrs) fees will be \$250 (\$125 for WCA members).