



# Join ACA Today!

1. Join online at [www.aca.org](http://www.aca.org) and pay with your credit card.
2. Or, fill out and return the completed application and payment to ACA, ATTN: Membership.
3. Or, email this form to [memberships@aca.org](mailto:memberships@aca.org). **For more information, call 1-866-538-1929.**

**AMERICAN  
CORRECTIONAL  
ASSOCIATION**

## Membership Categories *Check one.* Join Renew

### U.S. and U.S. Territories Dues

- Professional  1 yr. \$35  3 yrs. \$99
- 
- Organizational  1 yr. \$300
- 
- Supporting Patron  1 yr. \$350
- 
- Associate  1 yr. \$25 *Check one:*  Student  Retired

### International Dues

- Professional  1 yr. \$75  3 yrs. \$215
- 
- Organizational  1 yr. \$390
- 
- Supporting Patron  1 yr. \$440

## Member Information *In order to process your application accurately, all of the fields on this form must be provided.*

Name: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Phone #: (Check one)  Office  Cell \_\_\_\_\_ Email (Personal): \_\_\_\_\_

Send my *Corrections Today* magazine and new member packet to:  Mailing Address  Alternate Address

Alternate Address: \_\_\_\_\_

## Agency Information

Agency Name: \_\_\_\_\_ Agency State: \_\_\_\_\_

Facility Name: \_\_\_\_\_

Facility City: \_\_\_\_\_ Facility State: \_\_\_\_\_ Facility ZIP Code: \_\_\_\_\_

## General Information

Gender:  Male  Female  Other/Non-Specific Ethnicity: \_\_\_\_\_

Education:  High School Graduate  Associate's Degree  Bachelor's Degree  Master's Degree  Doctorate

Year you entered the field of corrections: \_\_\_\_\_ Have you previously been a member of ACA?  Yes  No

How did you learn about ACA?  Internet  Mailing  ACA Conference/Training Event  Referral  Other: \_\_\_\_\_

**Area of Concentration:** *Choose one.*  Administration  Chaplaincy  Classification  Food Service  Human Services  Inmate Programs  
 Intake and Release  Juvenile  Law Enforcement  Medical Care  Mental Health  IT  Substance Abuse Counselor  Training  
 Young Professional  Reentry  Community Corrections  Other: \_\_\_\_\_

## Payment Method *A \$25 fee will be charged for returned checks/electronic transactions.*

Remit payment to: **American Correctional Association • ATTN: Membership • 206 N. Washington St., Suite #200 • Alexandria, VA 22314**

Credit Card:  American Express  Discover  MasterCard  VISA  Check/Purchase Order enclosed, payable to ACA.

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_ / \_\_\_\_ Security Code: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_