

California Association of Drug Court Professionals

www.cadcp.org

January 1 – December 31, 2012 INDIVIDUAL MEMBERSHIP APPLICATION

Membership dues for the current calendar year are \$25.00 Renewal New Name_ Profession/Title Organization/Agency _____ City_____State____ Zip____County____ Phone (_______ E-Mail______ CADCP Committees: Please indicate if you wish to serve on a CADCP Committee, what your interest is. □ Fund raising □ Board of Directors □ Legislation & Legal Issues Communications □ Education & Training Membership Thank you!

For questions contact Doris Santiago, Membership Chair

□ Finance & Audit

E-mail: santiago@schat.com

Checks payable for the amount of \$25 should be sent to:

CADCP P.O. Box 1055, San Leandro CA 94577-0121