

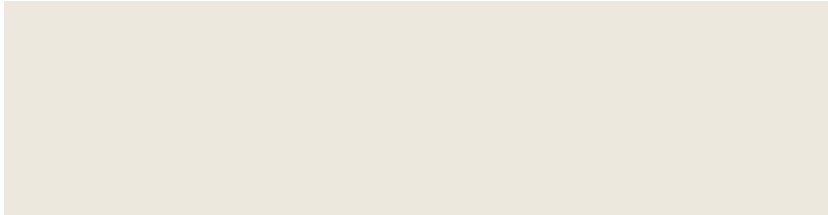


40 Sarasota Center Blvd., Ste. 107 • Sarasota, FL 34240  
 Ph: (941) 365-2135 | F: (941) 906-1556  
[www.fpra.org](http://www.fpra.org) | [state@fpra.org](mailto:state@fpra.org)

**Your FPRA membership expires on October 31, 2017.  
 Please return renewal form with your payment  
 by October 31, 2017.**

**Memberships may be renewed online at [www.fpra.org](http://www.fpra.org)**

2017/2018 RENEWAL



**PLEASE INDICATE YOUR LOCAL CHAPTER:**

<input type="checkbox"/> Capital	<input type="checkbox"/> Ocala
<input type="checkbox"/> Central West Coast	<input type="checkbox"/> Orlando Area
<input type="checkbox"/> Dick Pope/Polk County	<input type="checkbox"/> Pensacola
<input type="checkbox"/> Gainesville	<input type="checkbox"/> Space Coast
<input type="checkbox"/> Jacksonville	<input type="checkbox"/> SW Florida
<input type="checkbox"/> Lake County	<input type="checkbox"/> Tampa Bay
<input type="checkbox"/> Nature Coast	<input type="checkbox"/> Treasure Coast
<input type="checkbox"/> NW Florida Coast	<input type="checkbox"/> Volusia/Flagler
	<input type="checkbox"/> Member-At-Large

If you have questions regarding your membership renewal, please call the FPRA State Office at (941) 365-2135.

I certify that I spend 50% or more of my time in the practice of public relations.  
 Yes  No Specialty: \_\_\_\_\_

**MEMBERSHIP CATEGORY (Please check one.)**

- Individual Professional** (*you pay*) ..... \$220.00
- Institutional Professional** (*organization pays*) ..... \$220.00
- Multi-Institutional Professional** (*first member pays \$220, the second, third, fourth, etc. pays*)..... \$210.00
- Allied** (*associated with the field of public relations*) ..... \$220.00
- Retired** (*age 62 or older and retired from full-time practice of public relations for profit*) ..... \$20.00
- Counselors' Network** (*must have CPRC credential*) ..... \$50.00
- Student-to-Professional** (*students entering first year in professional workforce*) ..... \$85.00

**TOTAL AMOUNT ENCLOSED** ..... \$ \_\_\_\_\_

**PAYMENT INFORMATION**

Mastercard  Visa  Discover  AmEx # \_\_\_\_\_ Exp. Date \_\_\_\_ / \_\_\_\_  
 Name on Card \_\_\_\_\_ Credit Card Billing Address \_\_\_\_\_  
 Billing Zip Code \_\_\_\_\_ Security Code (Visa/MC/Disc: 3 digits on back; AmEx: 4 digits on front) \_\_\_\_\_

**THIS FORM MAY BE USED ONLY BY THE PERSON NAMED ABOVE. PLEASE USE THE LINES BELOW TO LIST ANY CHANGES (OR)**

My name is not the name listed above, but I would like to join FPRA. Please send an application to me at the following address:  
 Name \_\_\_\_\_ Title \_\_\_\_\_  
 Organization \_\_\_\_\_ Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

**Important information regarding your 2017-2018 FPRA Membership Renewal:  
 Membership Good Through 10/31/2018.**

Renewals received after November 1, 2017 will not be processed unless accompanied by a \$25 late fee.

Prorated rates do not apply to renewing members. **Please ensure that this form, or a copy, accompanies your renewal payment.**

**PLEASE MAKE CHECKS PAYABLE TO: FPRA**

**MAIL TO: FPRA STATE OFFICE, 40 SARASOTA CENTER BLVD., STE. #107, SARASOTA, FL 34240  
 FORMS WITH OTHER PAYMENT CAN BE EMAILED TO: [STATE@FPRA.ORG](mailto:STATE@FPRA.ORG)**