

Collaborative Divorce Association of the Capital District

Student / Intern Membership Application

Please print clearly and complete all fields below. This information is used to compile the CDACD membership directory

Background:

NAME: _____
ADDRESS: _____
SCHOOL: _____
PROGRAM OF STUDY: _____
ANTICIPATED GRADUATION DATE: _____
EMAIL: _____ PHONE: _____
WEBSITE: _____

Membership Requirements:

Continuous course of study in law, mental health field, financial planning, or accounting. Student/Intern members may be enrolled in an undergraduate or graduate program, which upon completion of that area of study, and upon completion of the requisite collaborative divorce training, would qualify the student for full voting membership.

_____(initial) I acknowledge that I meet the requirements of affiliate membership in the Collaborative Divorce Association of the Capital District. I pledge to adhere to these requirements.

Signature: _____ **Date:** _____

Please submit the following by **January 31st** to complete your application:

1. Completed membership application
2. Annual dues of \$75 (made out to "CDACD")

Mailing address:
CDACD
P.O. Box 38165
Albany, New York 12203

Benefits of Membership:

1. Opportunity to participate as an affiliate collaborative practitioner
2. Listing on the CDACD website as an affiliate member
3. Membership meetings with networking opportunities
4. Continuing educational trainings
5. Marketing visibility in the newsletter and website
6. Regular email notice of upcoming events
7. Advanced training opportunities offered by CDACD
8. Affiliation with an alliance of professionals committed to advancing the use of collaborative, non-adversarial strategies to help clients achieve agreements in a dignified, thoughtful and respectful manner