

FLORIDA LACTATION CONSULTANT ASSOCIATION 2017

(Membership Form for new membership or renewing with changes)

_____ \$40.00 Individual

_____ \$20.00 Non-paid Individual

_____ \$20.00 Passing IBCLCE (2106) for first time

FLCA membership runs on a calendar year (January 1 to December 31). If you join between January and September, dues will be applied to the current year's membership.

Last name First name credentials (i.e. IBCLC)

Address

City State Zip code Address type: Home _____ Business _____

Home or cell phone Business Phone Email

Place of employment Title or position

Member of **ILCA** ? Yes No Member of **USLCA** ? Yes No

Every FLCA member is added to:

Member's Registry: a **private** listing of **FLCA** members in the Members Only Section at the FLCA website: www.flca.info

FLCA database is kept by the Treasurer & Membership Secretary

Free optional Public listing of FLCA members who wish to advertise their lactation services:

Lactation Services Resource Directory -Please fill in **ALL** spaces.

Counties listed under

Name & credentials

Name of Institution or Business

Address City State Zip code

Hours Available

Services Provided

Website or Business email

To pay online go to www.flca.info and click on join or renew. Or if paying by mail, print this form, complete it, and mail along with check to Treasurer Mary Buskohl-Coulton. Make check payable to FLCA.

Mary Buskohl-Coulton FLCA Treasurer 483 Hillside Dr Orange Park, FL 32073

A check returned to FLCA due to insufficient funds in your account will incur a fee assessed by our bank.