



Lancaster-Lebanon
Athletic Trainers' Association

Lancaster-Lebanon Athletic Trainers' Association

Membership Application

This application once filled out, can be saved to your pc with a filename of your choosing. When completed, attach the file to an email and send it to hfjalkowski@millersville.edu. The dues fee can be mailed directly to the address as stated below. The saved file can be recycled for future years.

Name _____ Employer _____

The information below has not changed from the previous year except where indicated.

Home _____ Work _____ E-mail _____
Address _____ Office # () _____
City _____ Cell # () _____
State _____ Zip Code _____ Home # () _____

BOC Certification # _____ Date of Certification _____
PA License # _____ Date of Certification _____

Employment Setting—check all that apply

- | | |
|--------------------------|----------------------------|
| _____ College/University | _____ Clinic/Outreach |
| _____ Secondary School | _____ Hospital |
| _____ Public | _____ Corporate/Industrial |
| _____ Private | _____ Amateur/Recreational |
| _____ Professional Sport | _____ Other |

Job Title _____ (primary) _____ (secondary)

Membership Category

- _____ Certified (\$10, includes voting privileges)
- _____ Advisory (\$5)
- _____ College Student (\$5)

I verify that all of the above information is accurate and complete.

Signature _____ Date _____

Please submit completed dues (check or money order payable to LLATA) to:

Katie Parmer
105 Pucillo Dr.
Millersville University
Millersville, 17551