



American Planning Association
Florida Chapter

Creating Great Communities for All

APA Florida
Attn: Broward Section
 2017 Delta Blvd. Suite 201
 Tallahassee, FL 32303-4226
www.floridaplanning.org/broward

MEMBERSHIP APPLICATION/RENEWAL

NOTE: MEMBERSHIP TERM JANUARY - DECEMBER

Please submit your application digitally using the button below or mail to the address above.

Personal Information

First Name: _____ Last Name: _____

Check here if this is a membership renewal and there are no changes to your information. Active members with BAPA can simply provide your name above and the method of payment, below.

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell Phone: _____

Email: _____

Employment/Student Information

Employer/School: _____

Position/Title: _____

Address: _____

Phone: _____

Email: _____

Where would you prefer to receive notices? Work / School Information Home / Personal

Membership Information: (please mark appropriate)

Non-APA Member (\$36)

APA Florida – Dual Section Member (\$0)

Are you AICP? Yes No AICP No. _____

Payment method: Cash Check* (Check # _____) Paypal (<https://www.paypal.me/browardAPA>)

**Please make checks payable to APA Florida.*

 Member Signature (Type name in plain text for digital form)

 Date

Submit Digitally!