



122 East 42nd Street Suite 2310, New York, NY 10168-0002
membership@apsa.org | apsa.org | 212-752-0450

2024 SENIOR MEMBER OPT-IN RETIREMENT DUES FORM

This Senior member dues adjustment request will be reviewed by the National Office.
Please complete, scan and email to membership@apsa.org or send via US mail to the above address.
Must apply by January 31, 2024**/***

***Eligibility:** Psychoanalyst Clinical Member upon reaching senior membership status the calendar year after turning 70 years old (and after 10 years of membership), members will be eligible to request Semi-Retired or Retired dues status. Such members will retain all member benefits including voting and holding office.

- **Semi-retired:** eligible Members working less than 15 hours a week would pay dues equal to 2/3 of the Active member full dues rate.
- **Retired:** eligible Members not deriving income from clinical practice (psychoanalysis, psychotherapy, clinical consultation, supervision, pharmacology and testing) would pay dues equal to 1/3 of the Psychoanalyst Clinical Member full dues rate.

Member Name	
Mailing Address	
City, State, Zip	
Email	
Phone	
Local Affiliation	

Please check-off applicable circles:

I confirm that I am 71 years of age and have ten years of membership in APSA. Therefore, I am requesting a dues reduction based on my retirement status:

- Fully retired:** *I attest that I am now fully retired and no longer derive income from clinical practice (including psychoanalysis, psychotherapy, clinical consultation, supervision, pharmacology, and testing).*
- Semi-retired:** *I attest that I am now semi-retired and am working less than 15 hours a week.*

Member Signature

Date

****Note that eligible senior members need to apply for retirement status by January 31st if they wish to qualify for applicable retirement discount for the current year.**

Forms received after January 31, 2024, will NOT have their IPA dues reduced for the current year as the IPA finalizes member dues as of January 31st.