

**WEST VIRGINIA COURT REPORTERS ASSOCIATION
MEMBERSHIP APPLICATION/RENEWAL**

Application Renewal
Name: _____

Home Address: _____

Business Address: _____

Select one address for WVCRA mail: Business _____ Home _____

Telephone: Office: _____ Home: _____ Cell: _____

Number to be listed in the Membership Directory: Office: _____ Home: _____ Cell: _____

Email address: _____

Official: List Court and Judge _____

Freelance: List name of firm or sole proprietorship _____

CART/Captioner

Certifications Received: RVR; RPR; CCR; CVR; CM; CSR; CLVS

Other Certifications: _____

Support Services: _____ Computer-Aided Transcription; _____ Conference Room;

_____ Litigation Support; _____ Realtime; _____ Video; _____ Education; _____ Captioning;

_____ CART; _____ Video Conferencing

MEMBERSHIP TYPE: (Check One)

\$ 50.00 Professional Reporter/Captioner/CART

\$ 5.00 Student Reporter

\$ 20.00 Scopist/Proofreader

\$ 20.00 Instructor

\$ 20.00 Other Profession

\$ -0- Retired

ENDORSEMENT BY A REPORTER MEMBER OF WVCRA: (for application only)

I, _____, a reporter member of WVCRA, hereby certify that _____ supports and subscribes to the purpose of WVCRA, including the preservation, support, and advancement of the field of verbatim court reporting by use of shorthand symbols, manually or by machine, or by use of a voice writer reporting methods.

MAIL COMPLETED APPLICATION WITH DUES PAYABLE TO WVCRA TO:

Terri R. Cheslock
WVCRA Secretary-Treasurer
Post Office Box 943
Fairmont, WV 26555-0943