2020 MEMBERSHIP APPLICATION MARYLAND COURT REPORTERS ASSOCIATION

709 S. KAYWOOD DRIVE SALISBURY, MARYLAND 21804

MCRA RESPECTS THE PRIVACY OF ITS MEMBERS. INFORMATION BELOW IS FOR THE MCRA DATABASE ONLY

NAME:			
ADDRESS			
PHONE: H:	W:	CELL:	_
EMAIL ADDRESS:	CERTIFICATIONS:		
FIRM/COMPANY NAME:		NCRAID:	
METHOD OF REPORTING: MACHINE	STENOMASK	VOICEWRITER	
YEARS OF REPORTING PROFESSION:			
	MEMBERSHIP TYPI	ES	
Reporter: An official court, legislative or	regulatory commission co	ourt reporter, any person who	is engaged as a
court reporter in the active practice of ge	eneral reporting.		
Associate: A teacher of court reporting of	or anyone connected in a	n official capacity with a sch	ool or college
conducting a court reporting course, or in	nterested in the preserva	tion, support and advanceme	nt of the field of
court reporting, but not in any way active	ely engaged in the verbat	im reporting or proceedings,	not otherwise
eligible for membership, may, upon app	lication and approval by	the Executive Board, become	e an Associate
member. Such members need not meet	the requirements for the	e skill in the art of verbatim r	eporting of
proceedings by the use of shorthand sym	nbol, steno mask, or voice	writing.	
Student: A person enrolled in a school or	r college conducting a cou	ırt reporting course, or studyi	ng privately under a
Registered Professional Reporter (a desi	ignation of NCRA) shall b	e eligible for student membe	rship in this
Association.			
Please check your membership request:		Please check which mos	t describes you:
() Reporter: \$100		() Freelance () Legislative () Official	
() Associate: \$50		() Captioner () Hearin	ng ()Cart
() Student \$25		()Other	
() Tax-Deductible donation: \$25.00 or	\$		
Please indicate the services you provide:	•	Academic Degrees:	
() Cart	() AADegree		
() Captioning		() MA/MS Degree	
() Litigation Support		() BA/BSDegree	
() ASCII		() Ph.D.	
() Realtime		() Other	
Would you like to sponsor a student (\$2	25) () Yes () No	()	
Are you interested in serving on an MCF		No.	
Are you interested in joining the MCRA			
Check enclosed: () Credit Card: () Vi	sa () Mastercard		
Credit Card Number		Security Code:	
Expiration Date			
MCRA USE ONLY: Payment received:			