APPLICATION FOR MEMBERSHIP

MISSISSIPPI ASSOCIATION OF PUBLIC ACCOUNTANTS
12030 Freetown Rd • Vicksburg, MS 39183
601-631-3325 • Fax 601-631-3326

Please type or print your name above as you wish it to appear on your MAPA Membership Certificate.

Name of Firm_____

Firm Street Address_____ City_____ State____ Zip_____

Mailing Address_____ City_____ State____ Zip_____

Office Phone_____ Home Phone_____ Date of Birth_____

ACTIVE MEMBERSHIP – PRINCIPAL **Y N**
Are you at least 21 years of age? ( ) ( )
Are you a resident of the United States? ( ) ( )
Are you engaged in the practice of Public Accounting and/or taxation and do you maintain an office for your accounting or tax practice? ( ) ( )

ACTIVE MEMBERSHIP –STAFF ACCOUNTANT
Are you employed as a ( ) Junior or ( ) Senior Staff accountant by a ( )Public Accountant or ( ) Certified Public Accountant? ( ) ( )
Are you employed in a non-public field of accounting with your primary duties being in accounting or tax? ( ) ( )
( ) Government ( ) Financial Institution
( ) Private sector business ( ) Non-profit entity
Are you employed in Education? ( ) ( )
Do you hold any of the following: ( ) CPA ( ) Enrolled Agent
ACAT Accreditation as ( ) ABA ( ) ATP ( ) ATA
Do you have a degree in accounting? ( ) BA ( ) BS
( ) Other_____

ASSOCIATE MEMBERSHIP
Are you a clerical employee of a MAPA member engaged in an accounting and/or tax practice? ( ) ( )
Are you a representative of a firm which provides professional materials and/or services in the fields of accountancy and/or taxation? ( ) ( )

RECIPROCAL MEMBERSHIP
Are you a member of another state association affiliated with the National Society of Public Accountants?
( ) Yes ( ) No
Name of Affiliated Association_____

STUDENT MEMBERSHIP
Are you a full time student majoring in accounting? ( ) Yes ( ) No

Name of School_____

DUES SCHEDULE
Annual dues are payable IN FULL in advance and are prorated on a quarterly basis to June 30, the end of MAPA's fiscal year. MAPA dues are deductible as business expenses, but not as a charitable deduction.
( ) Active Membership Principal Annual Dues $130
( ) Active Membership Staff Accountant Annual Dues $65
( ) Associate Membership Annual Dues $47
( ) Reciprocal Membership $25
( ) Student Membership-first year free; $5 per year thereafter.
Make checks payable to MAPA
Mail to MAPA • 12030 Freetown Rd • Vicksburg, MS 39183

CPE REQUIREMENTS FOR ACTIVE MEMBERSHIPS

Principal Member – 72 hrs. each 3 year cycle; Minimum of 16 must be earned each year.
Staff Accountant - 36 hrs. each 3 year cycle; Minimum of 8 must be earned each year.

I hereby state that all information submitted is both accurate and true. I further state that if I am accepted as a member of MAPA I will abide by the Constitution and By-Laws of MAPA and will practice in strict conformity with the Code of Ethics and Rules of Professional Conduct as adopted by MAPA.

Date_____ Signature of Applicant_____

Date_____ Signature of Sponsor_____

Date_____ Signature of Membership Chairman_____