



South Carolina Association of Certified Public Accountants 2010 Application for Membership

SCACPA wants to make becoming a member as convenient as possible! Simply complete the following form and remit to SCACPA with the applicable dues payment and initiation fee via:

📧 **Online at:** www.scacpa.org 📠 **Fax to:** (803) 791-4196

✉️ **Mail to:** SCACPA, 570 Chris Drive, West Columbia, SC 29169

PART ONE: Contact Information

First Name: _____ Middle: _____ Last: _____ Nickname: _____

Email Address: _____ Date of Birth: ____/____/____ Gender: Female Male

Firm/Organization: _____

Business Type: Accounting Firm Industry Government Education Other: _____

Street Address: _____ PO Box/Zip Code if different: _____/_____

City: _____ State: _____ Zip: _____ Bus. Phone: _____ ext. _____

Home Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Spouse's Name: _____ AICPA Member No.: _____

Please select the address at which you would like to receive SCACPA communication: Home Office

PART TWO: Membership Type: check one (refer to page two for membership type descriptions and requirements):

Regular Membership – Licensed CPA in SC (\$185 annual dues, plus \$35 initiation fee)

SC Certificate No.: _____ Date Issued: _____ How Obtained: Exam Reciprocity Other

If obtained by reciprocity, give original certificate date and state: Certificate No. _____ State: _____

Please select the regular membership category that best describes you:

Public Accounting Government Education Industry Banking Attorney

Associate or International Membership – Licensed and Residing Out of State (\$145 annual dues, plus \$35 initiation fee)

State Certificate No.: _____ State: _____ Date Issued: _____

Fellow-Government or Academic Affiliate (\$145 dues, plus \$35 initiation fee):

Employee of government agency Non-CPA teaching accounting at the college or university level

CPA Candidate (\$85 annual dues; no initiation fee required): Following graduation from an accredited accounting degree program, this membership category is limited to five years of membership.

Graduation Date: _____ Anticipated Date of Licensure: _____ CPA Supervisor: _____

Professional Affiliate (\$185 dues, plus \$35 initiation fee): Non-CPA employee of a SC CPA firm or individual practitioner

Student Membership (\$20 annual dues; no initiation fee required)

School: _____ Graduation Date: _____ Accounting Advisor: _____

Firm Administrator (COMPLIMENTARY; no initiation fee required)

SCACPA Chapter Dues (Optional): For information, please refer to the reverse side.

Catawba (\$60) Central (\$50) Coastal (\$130) Foothills (\$40)
 Grand Strand (\$125) Pee Dee (\$50) Piedmont (\$50) Sea Island (\$135)

Contributions to the SCACPA-PAC or Educational Fund (Optional):

Standard PAC Contribution \$50 Standard Educational Fund Contribution \$50

I hereby certify that the statements above are correct to the best of my knowledge and beliefs and I further certify that I have not been convicted by any court or other body of any crime, misdemeanor or discreditable act since I originally applied to take the CPA examination in South Carolina or for a South Carolina certificate by reciprocity and that any such act prior to the application has been explained to the satisfaction of the S.C. Board of Accountancy, that I have never been suspended or expelled from any professional organization, and that I have not suppressed any information which might have a bearing upon this application. I agree to abide by the decision of the Board of Directors as to this application and I agree, if elected, to be governed by the bylaws and rules of professional conduct of the Association.

Sponsor's Name: _____ SCACPA Membership No.: _____

Signature of Sponsor: _____ Signature of Applicant: _____

Date: _____ Date: _____

PART THREE: PAYMENT INFORMATION: Total Amount Due/Authorized: \$ _____

Method of payment: Check (payable to SCACPA) or Credit Card: Visa MasterCard AMEX Discover

Card No.: _____ Exp. Date: _____ CCV No.: _____

Signature: _____

This application valid through June 30, 2010; after this date, please contact SCACPA for a new application.

Questions? Please call 888.557.4814 (toll-free in SC) or 803.791.4181 or email kswartz@scacpa.org.

We look forward to receiving your application for membership and serving you in the years to come.

SCACPA General Membership Requirements and Definitions

- (a) Good moral character.
- (b) Sponsorship (by signature on the application form) of a member of the Association in good standing.
- (c) Those applying who are engaged in the practice of public accounting as a proprietor, partner, or shareholder or as an employee who has been licensed as a CPA for more than two years, are practicing in firms that are enrolled in SCACPA-approved practice-monitoring programs.
- (d) Members shall complete continuing professional education established by the Board of Directors.

Fellow Members:

Possession of a certificate as a Certified Public Accountant issued under the rules and regulations of the South Carolina Board of Accountancy.

Associate or International Members:

- (1) Possession of a certificate as a Certified Public Accountant issued by a state, District of Columbia, a territory or possession of the United States of America, or a similar certificate issued by a foreign body having responsibility for governing accounting and auditing matters, or
- (2) Completion of examination for obtaining a license as a Certified Public Accountant regardless of fulfilling any requirements with respect to experience, or
- (3) Employment in an accounting capacity, pursuing CPA certification, and supervised by a member of the association.

Professional Affiliate Members:

Non-CPA employee of a South Carolina CPA firm or individual practitioner.

CPA Candidate Members:

- (1) Obtained an accounting degree from an accredited program.
- (2) Approved applicant for the Uniform CPA Examination actively pursuing their certificate and licensure.
- (3) Employment in an accounting capacity, pursuing CPA certification, and supervised by a member of the association.

This membership category is limited to five years.

Academic Affiliate Members:

Non-CPA teaching accounting-related subjects at the college or university level.

Student Members:

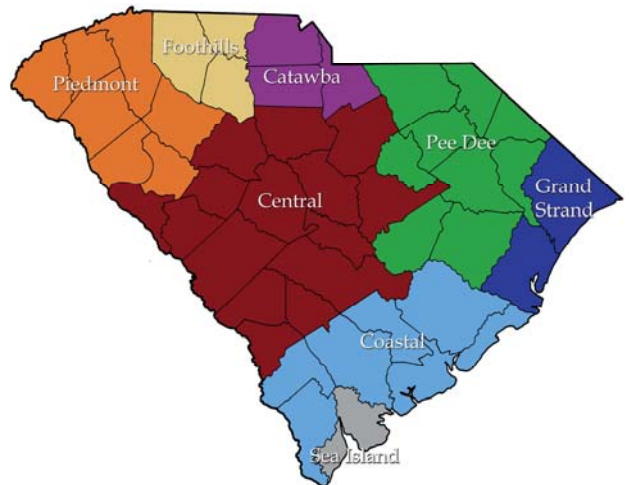
- (a) Enrolled full-time (12+ hours per semester) at the college or university level in an accounting program.
- (b) Sponsorship (by signature on the application form) of a member of the Association in good standing OR faculty or staff member at their college or university.

SCACPA Chapter Network

As a member of SCACPA, you are eligible to join one of SCACPA's eight regional chapters, based on the county in which you live or work. Chapters are an integral part of SCACPA and facilitate networking and educational opportunities throughout the state.

Chapters are...

- Affiliates of the Association;
- A source for nominees for SCACPA membership awards;
- A vehicle to develop relationships with area legislators, regulators and other professionals;
- **Catawba Chapter:** Chester, Lancaster and York counties
- **Central Chapter:** Aiken, Allendale, Bamberg, Barnwell, Calhoun, Edgefield, Fairfield, Kershaw, Lexington, McCormick, Newberry, Orangeburg, Richland, Saluda and Sumter counties
- **Coastal Chapter:** Berkeley, Charleston, Colleton, Dorchester, Hampton and Jasper counties
- **Foothills Chapter:** Cherokee, Union and Spartanburg counties
- **Grand Strand Chapter:** Georgetown and Horry counties
- **Pee Dee Chapter:** Chesterfield, Clarendon, Darlington, Dillon, Florence, Lee, Marion, Marlboro and Williamsburg counties
- **Piedmont Chapter:** Abbeville, Anderson, Greenville, Greenwood, Laurens, Oconee and Pickens counties
- **Sea Island Chapter:** Beaufort county
- Important in the recruitment of members;
- Responsible to SCACPA's Board of Directors; and
- Included in the Association's annual financial audit.



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