

CATSO 2021 Membership Renewal Form

Member Name:-----

Mailing Address:-----

Email:-----Telephone Number-----

Please check which trainees you attended:

Dr. Leslie Lothstein - June 19, 2020 -----

Annual Meeting - December 4, 2020 -----

Other trainings attended and dates -

| <u>Date</u> | <u>Topic</u> | <u>Hours</u> |
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**Since December 2019 have anything of these things occurred.**

Have you had a professional license/certification denied, revoked or suspended?-----

Have there been any malpractice judgments against you?-----

Has there been any findings of professional misconduct against you?-----

Have you been convicted of a felony or any statutory sexual offense?-----

I ATTEST THAT THE INFORMATION ABOVE IS ACCURATE TO THE BEST OF MY KNOWLEDGE

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*Name and date*

Renewal Dues \$125.00

Please send to Renewal Form and dues to:

**Eliza Borecka  
The Sterling Center  
1000 Bridgeport Avenue,  
Shelton, CT, 06484**