

— FFTA Membership Application —

Agency Name _____

Primary Contact _____

Title _____

Address _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

Phone _____ Web site _____

E-mail _____

Agency Executive Director _____

Current number of children/youth in treatment foster care program _____

Agency's annual treatment foster care budget _____

For the last fiscal year, provide approximate figures for:

- total number of children/youth served across all agency programs _____
- total annual operating budget across all agency programs _____
- total number of full-time (FT) and part-time (PT) staff employed by your agency FT _____ PT _____
- total number of licensed foster parents (*whether or not they have children placed in their home*) _____

Membership Type: Full Multi-Site Affiliate Individual

How did you hear about FFTA? _____

Is your agency accredited? Yes No If yes, by whom? _____

Payment Type: Check Visa MasterCard American Express Payment Amount: _____

Account#: _____ Expiration Date: _____ CSC Code: _____

Billing Address (if different than above): _____

Name on card: _____ Signature: _____

FFTA Federal Tax ID# 363593908

Please mail application and payment (U.S. Funds) to:

Family Focused Treatment Association
294 Union Street, Hackensack, NJ 07601-4303 USA



**Family
Focused
Treatment
Association**

— Annual Membership Dues —

Annual membership dues are based upon the budget of the treatment foster care program.
All payments must be in U.S. funds.

Membership Tier	U.S.	Outside U.S.
Under \$250,000	\$700	\$500
\$250,000 - \$500,000	\$825	\$625
\$500,001 - \$1,000,000	\$950	\$750
\$1,000,001 - \$2,500,000	\$1,250	\$950
\$2,500,001 - \$5,000,000	\$1,750	\$1,310
\$5,000,001 - \$10,000,000	\$2,250	\$1,690
\$10,000,001 - \$15,000,000	\$2,750	\$2,060
\$15,000,001 - \$20,000,000	\$3,250	\$2,435
\$20,000,001 - \$25,000,000	\$3,750	\$2,810
\$25,000,001 - \$30,000,000	\$4,250	\$3,185
Over \$30,000,000	\$4,750	\$3,560
Affiliate (not a direct service provider)	\$500	\$375
Multi-site (Additional site of an existing member)	\$250	\$190
Individual (retired, unemployed, student, and foster parent not employed by a child welfare agency)	\$150	\$115



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Call: 800-414-3382 ■ Fax: 201-489-6719 ■ Email: ffta@ffta.org ■ Visit: www.ffta.org