



FLORIDA COUNSELING ASSOCIATION

A BRANCH OF THE AMERICAN COUNSELING ASSOCIATION

INVOICE

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Invoice Number: 10280
Invoice Date: March 31, 2026
Invoice Sent To: Anita Woods

Member application

Item	Amount
Membership application. Level: Student (Non-Auto Renewal)	██████████
Extras: Student/Retired Membership Level Divisions - FACES, FASERVIC	██████████
	██████████
	Balance Due: \$0.00

**Please contact the FCA Office at fcaoffice@flacounseling.org if paying by check and allow additional time for processing if paying by check/money order.*

*Please make your check payable to **Florida Counseling Association**, note the **invoice number** on your check, and send to the address below. Again, **please email the FCA Office to let us know your check has been mailed.***

Florida Counseling Association
2750 Taylor Avenue, Suite A36
Orlando, FL 32806

Questions? Contact the FCA Office at fcaoffice@flacounseling.org

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