

Name:

County:

FLORIDA ASSOCIATION OF DRUG COURT PROFESSIONALS

www.fadcp.org

SEPTEMBER 2025 - AUGUST 2026 ORGANIZATIONAL MEMBERSHIP APPLICATION

Organization/Agency:

E-mail:

Problem-Solving Court Type (check all that apply): () Adult Pretrial () Adult Post-Adjudication () Veterans () Mental Health () Juvenile Pretrial () Juvenile

(Tax ID#: 65-1140643)

Phone:

Post-Adjudication () Dependency () DUI () Other-specify:				
Please list name, email address, etc. of UP TO SEVEN INDIVIDUALS included in the Organizational Membership. Also, indicate one of the following codes for each individual: (A) Judicial Officer (B) Law Enforcement (C) Treatment (D) General Government (E) Prosecution (F) Elected Official (G) Defense (H) Coordinator (I) Probation (J) Child Welfare (K) Educator (L) Planner (M) Evaluator (N) Other *If any of the members of your organization are interested in Board Membership or would like to assist with the Membership, Strategic Planning, Training/Conference, Bylaws, or Newsletter Committees please indicate this in the New or Renewal section!*				
Name	County	E-mail (REQUIRED)	Code	New or Renewal
1.				
2.				
3.				
4.				
5.				
6.				
7.				
Organizational Membership dues are \$200.00 - Make checks payable to "FADCP" and Mail Application and Payment to:				

Circuit: