



# Gold Coast Forensic Association Membership Application

[www.goldcoastforensics.org](http://www.goldcoastforensics.org)

600 Banyan Boulevard  
West Palm Beach, FL 33401

**Active and Associate Membership:** Shall consist of persons who are wholly or partially engaged in any of the various aspects of Criminal Justice as employees of National, State, County or Municipal Governments, or some sub-division thereof, or those who provide forensic science education and training, or private-sector forensic service providers. Examples include: Attorneys, Criminal Justice Educators CSI, Detective, Evidence Tech, Forensic Consultant/re-constructionist, Morgue employees, and SANE Nurses.

**Student Membership:** Shall consist of full-time college students enrolled at an accredited college majoring in a forensic science or criminal justice related field.

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## Contact Information

**Important: e-Mail address must be one which is checked often. This will be the means of invoicing, and announcements of job openings, classes and meetings.**

Title	First Name	Middle	Last Name		
Address Type	Street Address	City	State	Postal Code	
Primary Phone Type			Telephone		
Mobile	Landline	Personal	Business		
Primary e-Mail Address	e-Mail Type	Secondary e-Mail Address		e-Mail Type	

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## Personal Information

Name of employer OR name of school attending:

Job Title OR "Student" :

If working in Criminal Justice field, for how long? If a student, graduation is anticipated in...

Highest level of education received:

Degree / Major:

Have you ever been convicted of a felony or a crime involving moral turpitude?

NO  
YES

Explain:

# Experience

Please indicate which disciplines you are actively involved in.

Student      Fingerprint Identification      Forensic Photography      Footwear / Tiretread      Bloodstain Pattern Analysis      Crime Scene Investigations

Laboratory Analysis      Firearms / Tool Marks      Shooting Reconstruction      Forensic Imaging A/V      Other

Are you a member of the International Association for Identification?      NO  
YES (member # if available)

Are you a member of the Florida Division of the International Association for Identification?      NO  
YES (member # if available)

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## Reference (new applications only)

Your reference must be an Active / Associate Member of GCFA or Educator if applying for a Student Membership.

***I hereby submit my application for membership in the Gold Coast Forensic Association. All applications must be accompanied by annual dues payment, which will be refunded if the application is rejected. Choose the membership type you are seeking from the drop-down choices below. If filling this out by hand, write the appropriate choice from the class choices.***

**I understand that Membership Dues are due by January 31st of each year and I shall renew my membership no earlier than October 1st of each year.**

Initials

Applicant's signature

**Instructions:** Save this form as a .pdf and e-mail it to the Secretary, Neil Zielinski [csi18palmbeach@gmail.com](mailto:csi18palmbeach@gmail.com) as an attachment.

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For use by GCFA

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Approved by:

Approval Date: