



# Application

C.O.T.A. requires all applicants to complete and return an application for membership prior to screening interview. All information that you provide will be held in the strictest confidence. C.O.T.A. policy prohibits the giving of any applicant or member information to anyone. Our mailing list is carefully maintained by responsible officers within the organization and will never be sold or rented. Only you may share your personal information with others and we encourage discretion. C.O.T.A. and its officers cannot be held responsible beyond exercising reasonable care. This application is very general. It is intended for use by both transgender men and women.

**Femme/Homme Name:** \_\_\_\_\_

*Femme/Homme Name: If you don't already have a femme or a homme name, please select one that best fits your personality or is close to your real name. For transgendered men, please use a femme name. For transgendered women, please give a homme name.*

**Mailing Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

*Mailing Name & Address: We believe that your information is safe with us, however, we do encourage our members to obtain a Post Office Box. While you will have to use your real name to apply for the P.O. Box, you may list others who will be receiving mail there.*

**Telephone:** \_\_\_\_\_

*Note: It is far easier to contact you for the required interview you provide us with your telephone number. If you have any special instructions for telephoning you, please provide them below.*

**Telephone Instructions:** \_\_\_\_\_

*Telephone instructions: To help us contact you, you may wish to give us some special instructions. For example, "Please call between 8 and 10 PM", "Ask for Bill" or "Ask for Kim"*

**E-Mail Address E-Mail Address** \_\_\_\_\_

*E-Mail Address: For privacy reason you may wish to acquire an e-mail account other than your primary. Hotmail and Yahoo both offer such services.*

**C.O.T.A. has an e-mail list. The e-mail list is as secure as we can make it. Would you like to be added to the e-mail list?**

\_\_\_\_\_ **Yes** \_\_\_\_\_ **No**

The following questions are designed to help us get to know you better. There aren't any "right" answers. Answer those questions that apply to you.

1. In general terms describe your job or profession. \_\_\_\_\_

2. Other than crossdressing, list some of your hobbies or interests.

\_\_\_\_\_

3. What is your educational level? (high school, some college, college grad, etc..) \_\_\_\_\_

4. How did you learn about C.O.T.A.?

\_\_\_\_\_

5. Do you know anyone who is a member of C.O.T.A.? \_\_\_\_\_

6. Have you ever been or are you currently a member of a transgender organization? \_\_\_\_\_

If yes, please tell us about the organization.

\_\_\_\_\_

7. What crossdressing or transgender magazines do you read if any?

---

8. Approximately how long have you been crossdressing? \_\_\_\_\_

9. Have you or do you want to go out as your femme/homme self? \_\_\_\_\_

10. When you crossdress, do you try to look as much like a female/male as possible? \_\_\_\_\_

11. Do you feel that it is “wrong” to crossdress or that there is something “wrong” with you? \_\_\_\_\_

12. Have you ever tried to stop crossdressing? If “Yes”: how did that make you feel?

---

13. When you crossdress, how do you feel? (excited, comfortable, aroused, confused, etc..)

---

14. Have you ever considered living full time as a woman/man? \_\_\_\_\_

15. Do you consider yourself heterosexual, bisexual or homosexual? \_\_\_\_\_

16. Have you considered having sexual reassignment surgery (SRS)? \_\_\_\_\_

17. Are you currently in transition? \_\_\_\_\_

18. If you have a spouse, partner, girlfriend, boyfriend have you told them about your other self? \_\_\_\_\_

If “yes”, how did you tell them?

---

If “no”, do you plan to tell them? \_\_\_\_\_

19. In what way do you think that belonging to a support group can help you?

---

20. In what way do you think that you can help COTA. or its members?

---

21. On a separate sheet of paper (typed if possible) briefly tell us about your current crossdressing activities. Things such as, how often you dress, how you feel you look when you are dressed. It’s okay to have limited experience and skills and to need assistance with wigs, makeup and wardrobe C.O.T.A. is here to help you feel better about who you are and to help improve your skills. We want to know where you are right now, and what we can do to help you.

“I certify that I am at least eighteen (18) years of age and am seriously interested in joining C.O.T.A. and will abide by the bylaws and policies thereof.”

---

**Signature**