

ILaom Membership Application

Name _____ Date: _____ circle: Male Female

Certification(s) or Degree(s) _____

NCCAOM Acu. Cert. # _____ Exp. _____

NCCAOM Herbal Cert. # _____ Exp. _____

Acupuncture License # _____ State _____

Referral Address _____

City, Zip and County _____

Referral Phone _____ Fax _____

Area(s) of Specialty _____

Please circle the referral region you practice in: City of Chicago or Suburbs – N, NW, S, SW, W

Mailing address/city/zip _____

Phone for Phone Tree _____ Fax _____

Email address _____

Languages Spoken _____

Are you willing to volunteer for event?

Legislation?

Other?

MEMBERSHIP PRIVILEGES

CATEGORY	COST	VOTE	MAILING	REFERRALS	
<input type="checkbox"/> Professional	\$200	Y	All	Y	
<input type="checkbox"/> 1 st & 2 nd Yr Professional	\$100	Y	All	Y	
<input type="checkbox"/> Allied	\$100	N	All	Y	
<input type="checkbox"/> Out-Of-State Prof.	\$100	N	Most	Y	
<input type="checkbox"/> Student	\$ 50	N	All	N	School _____
<input type="checkbox"/> Friend	\$ 50	N	Most*	NA	Expected Grad _____
<input type="checkbox"/> Patron	\$ 500	N	Most*	NA	

All memberships receive Class discounts. *General Information, newsletter, continuing education, etc.

Please send this form, your payment and copies of your NCCAOM certification(s) and Illinois license to:

Illinois Association of Acupuncture and Oriental Medicine

5315 North Clark Street, Suite 611, Chicago, Illinois 60640-2113

if you have any questions, please call **312-962-0333**

To pay by credit card, please complete the attached authorization form
We accept Visa, Mastercard & Discover (\$5 processing fee for CC payment)

Name _____ Phone _____

Address _____

City/State/Zip _____

Credit Card # _____ Exp. Date _____

Signature _____ Date _____

BRIEF DESCRIPTIONS OF MEMBERSHIP CLASSES IN THE ILLINOIS ASSOCIATION OF ACUPUNCTURE AND ORIENTAL MED.

Association memberships are *annual and expire in **December***, please renew your dues by January.

PROFESSIONAL A Professional member must be an NCCAOM certified acupuncturist, licensed to practice Acupuncture in the State of Illinois under the Acupuncture Practice Act. Professional Members possess full rights and privileges as voting members of the association. The annual dues for this category are \$200.

FIRST OR 2nd YEAR PROFESSIONAL A first or 2nd Year Professional Member shall meet the same qualifications and possess full rights and privileges as a Professional Member except the dues are one half the amount of dues paid by a Professional Member, \$100. This category is the same as Professional Member. If the Illinois license is issued on or after July 1st, it will be assumed that the 2-year period will begin the January after the issuance of the license.

OUT-OF-STATE PROFESSIONAL An Out-of-State Professional Member must be a licensed or NCCAOM Board-Certified acupuncturist, but not licensed to practice in Illinois. An Out-of-State Professional Member may not hold office, may not vote, may not serve as a committee chair, but may serve on committees. An Out-of-State Professional Member possesses reduced rights and privileges as may be specified by the Board of Directors. Dues for this membership are one half the amount of dues paid by a Professional Member, \$100.

STUDENT A Student Member is actively studying acupuncture in an ACAOM-accredited school or apprenticing with an acupuncturist with at least ten years of experience. A Student Member possesses the right to attend all general meetings and serve on committees. Student members possess rights and privileges as non-voting members. The annual dues for this category are \$50.

ALLIED HEALTH PROFESSIONAL An Allied Health Professional is a health care practitioner who supports the goals and ideals of the ILAaom. An Allied Health Professional will receive any newsletters, announcements, and information published by the Association and possesses non-voting membership privileges for such services provided by the Association to its membership. A member may serve on committees, but may not serve as a Director or committee chairperson. The annual dues for this category are currently \$100.

FRIEND OF ACUPUNCTURE A Friend of Acupuncture is an individual who is not actively engaged in the study or practice of acupuncture, but who supports the aims of this Association. Any person or organization wishing to support the Association may subscribe to membership and will receive any newsletters, announcements, and information published by the Association; and possesses non-voting membership privileges for such services provided by the Association to its membership. A Friend of Acupuncture may serve on committees, but may not serve as a Director or committee chairperson. The annual dues for this category are \$50.

PATRON OF ACUPUNCTURE A Patron of Acupuncture is an individual who is not actively engaged in the study or practice of acupuncture, but who supports the aims of this Association and makes a substantial contribution to advance the goals of the ILAaom. Any person or organization wishing to support the Association may subscribe to membership and will receive any newsletters, announcements, and information published by the Association; and possesses non-voting membership privileges for such services provided by the Association to its membership. Patrons of Acupuncture may serve on committees, but may not serve as a director or committee chairperson. The annual dues for this category are currently \$500.

Please refer to the membership application for a summary of privileges (mailings, referrals, voting, etc.)

Notice: Dues may not be tax deductible depending on lobbying activities. ILAaom will notify members of deductibility status at year's end