 **Maryland Reflexology Association**

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

Membership Year: July 1, 2021 - June 30, 2022

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_County\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_County:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Website Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please Note: Complete all information as you would like it to appear on the MDRA website. Please check the following box if you do not wish your name to be added to the MDRS website.

* **No, I do not want to be included on the MDRA website**

**Please select the membership that is appropriate to your education level**

* **Professional Membership** $50 per year

Professional Membership requires successful completion of training from a school of reflexology and successful passing and maintaining obligations to ARCB.

* **Practitioner Membership** $50 per year

Practitioner Member requires successful completion of 110 hrs of reflexology training from a reflexology school.

* **Advocate / Student Membership** $25 per year

Advocate/Student Membership is open to any non certified reflexologist, student training in reflexology, clients or other interested persons.

School Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Teacher Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_No. Of Hours Completed:\_\_\_\_\_\_\_\_Date of Completion:\_\_\_\_\_\_\_\_\_\_

Are you nationally certified by ARCB? \_\_\_\_ Yes \_\_\_\_\_ No Certification # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I want to be an MDRA \_\_volunteer \_\_membership \_\_newsletter \_\_conference \_\_delegate \_\_other

**I verify that I have met the requirements for the level of membership which I am applying and I have included all required documentation. I understand that if any of the above information is found to be in correct or invalid, my membership will be denied.**

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\*\* Payment due on or before June 30, 2021\*\*\* You may pay via PayPal or check. Make checks payable to Maryland Reflexology Association, ℅ Caroline Klem, 80 Via Barcaza, Trabuco Canyon, CA 92679.