



Kansas Association of Oriental Medicine

CONTACT INFORMATION

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

For Directory: Biz Name : _____

Business Address: _____

City: _____ State: _____ Zip: _____

Business Phone Number: _____

E-mail Address: _____

Web-site: _____

Preferred Mailing Address: Home Address Business Address

PROFESSIONAL INFORMATION

NCCAOM Certified Yes No

What NCCAOM Certifications do you hold? _____

When were you first certified? _____ Certification expiration date: _____

Style of Acupuncture Practice TCM Five Element

Specialty or Focus of Practice: _____

State licensed in and License number: _____

Additional Professional Organizations to which you belong: _____

COMMITTEES

Would you be interested in helping out with any of the following committees?

- | | |
|--|--------------------------------------|
| <input type="checkbox"/> Acupuncture Day | <input type="checkbox"/> Legislative |
| <input type="checkbox"/> Education | <input type="checkbox"/> Membership |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Events |

MEMBERSHIP LEVEL

	check	online
<input type="checkbox"/> Professional Acupuncturist (NCCAOM)	\$125	\$129
<input type="checkbox"/> Associate Member (non-voting)	\$100	\$104
<input type="checkbox"/> Student Member (non-voting)	\$ 50	\$52
Total Enclosed	\$ _____	

SIGNATURE

DATE

Please forward payment, completed form and,
for Professional Acupuncturist level, a copy of your KS LAc wallet card to:

KsAOM c/o Shelly Callahan, Treasurer
1100 E. Lost Hills St.
Derby, KS 67037
wheatlandmassage@att.net

Mail form and enclose a check made out to KsAOM, OR pay the amount indicated
above by credit card online at www.ksaom.org (on donate page) & email the form.

**Please notify KsAOM within 5 days of a change of address, email, or changes in other
contact information.**

If you have any questions or need more information, please call Sandra Wilkes at
913-709-3239 or e-mail tcmKsAOM@gmail.com

WELCOME TO THE KANSAS ASSOCIATION OF ORIENTAL MEDICINE!