



North Carolina Reflexology Association

www.reflexology-nc.org

(RAA Affiliated State)

Membership Year: July 1, 2015-2016



Name: _____ Email: _____

Office Address: _____

Home Address: _____

Office Phone: _____ Home Phone: _____ Website: _____

NOTE: Your office address will be used for the NCRA online and print directory. Complete information as you would like it to appear. Check the following box if you do not wish your name to be added to the directory. **No, I do not want to be included in online or print directories.**

Professional Membership

NCRA New Renewal

Prorated Last 6 mo. NEW Member Only

NCRA Professional Membership
NCRA Personal Member Web Page (4 pages)
NCRA Member Web Page

\$40 per year
 \$40 set up first year (add \$15 each to build 1st year)
 \$15 yearly to maintain (\$15 after 1st yr.)

\$ 20 for January 1- June 30

Professional Membership requires completion of a 200 hour reflexology-only training course and certification by a school or a national non-profit reflexology testing board. Professional members may vote, hold office, and be eligible for a listing under the Professional Member Practitioners on the on-line directory. Documentation of specific reflexology training which has been certified by a school or certified /accredited teacher of reflexology is required. Hours of training from another therapy will not be considered. **Proof of 200-hour training or national board certification must be attached to process NEW applications.**

NCRA/ reserves the right to verify all credentials. **ARCB:** Yes **ARCB Number** _____ Not ARCB

School Name: _____ Teacher's Name: _____

Address: _____

Phone _____ No. of Hrs Completed: _____ Date of Completion: _____

Are you nationally certified by a non-profit reflexology certification board? Yes No Certification #: _____

Name/Address of Board: _____

Associate Membership

NCRA New Renewal

Prorated Last 6 mo NEW Member Only

NCRA Associate Membership

\$25 per year

\$15 for January 1- June 30

Associate Membership is open to non-certified reflexologists not meeting the Professional member level standards, a student training in reflexology, a client or other interested person, an agency, a school, a business, a manufacturer, state association, or any other entity concerned about, and desiring to support the growth and development of the field of reflexology. **Associate member schools and offices** are eligible for a listing on the on-line directory. NCRA/ reserves the right to verify all credentials.

I want to be an NCRA volunteer: Newsletter Conference Membership Legislation Education Website Research PR 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 incorrect or invalid, my membership will be denied.

Signature: _____ Date: _____

Make checks payable and mail to: NCRA 1100 F-103 Logger Court Raleigh, NC 27609 Email Contact: info@reflexology-nc.org	NCRA USE ONLY	
	Received by: _____	
	Date – NCRA: _____	
	Check #	Amount \$