



WAHAssociation.org

Washington State Homeopathy Association

Name:

Signature:

Email:

Date:

Phone:

Payment method:

Address:

School:

Yr:

Membership Categories

ALL RENEWALS ARE DUE MAY 31st OF EACH YEAR

___ **Annual Membership \$30.00**

- Name listed on WAHA! website (but no contact or website information)
- Discount on WAHA! sponsored seminars & events.

___ **Practitioner Listing (includes Annual Membership) \$80.00**

- Listing on WAHA! website with details you provide us (name, contact and website information)
- Discount on selected WAHA! sponsored seminars & events.

___ **Please list my contact information on WAHA! website.**

___ **Please list and link my website.**

Please provide contact information for website: (i.e., name, address, phone, website address)

All Members of WAHA! receive:

- e-newsletter
- Networking opportunities/ Homeopathic community
- 10-30% off orders at Minimum Price Books