



CNPA (Jan –Dec) 2012 Membership Application

Payment and License (or student identification) MUST be included with application

Name and Credentials: _____ Lic# _____

Home Address: _____

City: _____ State: _____ Zip _____ Home Phone: _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip _____

Business Phone: _____ Email (REQUIRED): _____

Membership Selection (See Back for Details)

(NOTE: Membership is from Jan-Dec)

___ **Basic:** Licensed ND with current license: **\$400.00/yr or \$100/qtr** (CC required for quarterly payments)

___ **Supporting:** Licensed ND w/current license: **\$600/yr or \$50/month** (CC required for monthly payments)

___ **Leader:** Licensed ND with current license: **\$1200/yr or \$100/month** (CC required for monthly payments)

___ **Recent Naturopathic Graduates:**

___ (2009 Graduate) **\$300 or \$85/qtr** ___ (2010 Graduate) **\$200 or \$60/qtr** ___ (2011 Graduate) **\$100 or 35/qtr**

Other:

___ **Retired:** Naturopathic Physician **\$100** ___ **Associate:** Licensed healthcare practitioners **\$150**

___ **Supporting:** Individuals or groups who do not qualify for any other membership category **\$100**

___ **Student:** Enrolled in an program accredited by the council on Naturopathic Medical Education in Naturopathic Medicine and who will be eligible for licensure in CT upon completion of the required course of study **\$40**

___ **Friend:** Will be included in notifications on legal issues, scope of practice changes in CT **\$25**

Payment Options: ___ Check (payable to “CNPA”) ___ Visa / Mastercard (circle one)

Automatic Renewal (circle one): Yes / No **(You must have a cc on file for auto renewal)**

Card Number _____ Exp. _____ CSV: _____

Name On Credit Card: _____

CC Billing Address: _____

Single Payment (write amount due): _____

Quarterly/Monthly Payments (write amount per quarter/month): _____

Please send THIS FORM, PAYMENT and a COPY OF YOUR CURRENT LICENCE or student ID to:
CNPA c/o Dr Michael Gazsi, PC 34 Rolf Drive Danbury, CT 06810 Or via Fax: (203) 797 0753

CNPA MEMBERSHIP BENEFITS

BENEFITS	Basic	Supporting	Leader
LEGAL			
Receive Legislative Alerts & Updates	✓	✓	✓
Receive updates on Insurance	✓	✓	✓
Receive updates on Law Changes	✓	✓	✓
CNPA WEBSITE (being updated)			
Listing on CNPA Website	✓	✓	✓
Hyperlink		✓	✓
Highlighted description of Practice	15 words	50 words	100 words
Practice Logo or Picture of Doctor		✓	✓
Featured Practice on Homepage			✓
EDUCATIONAL BENEFITS /CE EVENTS			
Discounted Conference Attendance	25% off	50% off	Free
25% Discount off Townsend Letter	✓	✓	✓