



YES, I want to join The National Association for Holistic Aromatherapy  
www.naha.org • info@naha.org • (828) 898-6161 (EST) FAX: (828) 898-1965

Please mail application to: NAHA • PO Box 1868 • Banner Elk, NC • 28604  
Membership Application Please Print

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

Business Name: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

Phone (Home): \_\_\_\_\_ Phone (Bus): \_\_\_\_\_

Phone (Mobile): \_\_\_\_\_ Fax: \_\_\_\_\_

Friend\*Business\*Professional\*Donor Membership Category: (Membership is good for one year)  
**New Membership / Renewal / Upgrade / Change/Addition of info. only**

\_\_\_\_\_ Friend: \$50. / \$75. International      \_\_\_\_\_ Professional \$125./\$155. International  
\_\_\_\_\_ Business: \$150. /\$180. International      \_\_\_\_\_ Donor \$250./ \$300. International  
\_\_\_\_\_ Grand Donor \$1000. or more

Payment Method: Check #: \_\_\_\_\_ Amount: \_\_\_\_\_

**\*\*A \$25.00 fee applies for NSF/Returned cheques**

Visa MasterCard American Express : Credit Card#: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ V-Code (Last 3-4 digits on back of cc above signature area) \_\_\_\_\_

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

Date: \_\_\_\_\_

**How did you hear about NAHA?** \_\_\_\_\_

\*Professional Member Applicant must mail a listing of their background that meets our Professional Level Requirements with completed application for approval process.

Go Green-save time and paper: JOIN or RENEW Membership Securely Online [www.naha.org](http://www.naha.org)  
Print out mail-in application is available on website [www.naha.org](http://www.naha.org) JOIN NAHA webpage  
Or call NAHA office for more information (828) 898-6161 (EST) Leave best time to return call  
Use back of application for any comments/feedback/notes

Mail Application with payment to: NAHA • PO Box 1868 • Banner Elk, NC • 28604