



NEW YORK ELECTROLYSIS ASSOCIATION

Application for Affiliate Members and Non Members for NYEA Meeting Announcements

****All information will be held confidential****

This application is for Affiliate Members and Non Members

Affiliate Member (Out-of-State AEA Member)

Affiliate member of: _____

Non Member electrologist State: _____

Year: _____

Non Members are urged to join AEA to receive all benefits of AEA/State Affiliate

Term: January 1 to December 31

It is the responsibility of the Applicant to reapply annually to continue to receive meeting announcements and to notify NYEA of any contact information changes

Name: _____ Home Phone: _____
Home Address: _____
City: _____ State: _____ Zip Code: _____
Business Name: _____ Business Phone: _____
Business Address: _____
City: _____ State: _____ Zip Code: _____
E-Mail Address: _____ Web Address: _____

Which above address would you like correspondence sent to: **Home** **Business**

License Number(if in a licensed state): _____

(NOTE: A copy of license must accompany this application, if applicable)

CPE Number: _____ AEA Member Number: _____

Signature: _____ Date: _____

Note: Please print and complete this application and forward to the address below. You will be notified of your acceptance to NYEA.

If you want to join the AEA, go to www.electrology.com/membership.htm where you can get information. This will give you access to the benefits of the national and state affiliate organizations at membership rates.

**Catherine LaGrutta, CPE, NYEA Treasurer NYEA
7420 Ridge Blvd 5H
Brooklyn, New York 11209**

