

## MAAOM Membership Application/Renewal

Please complete the following form. The information you provide in Section 1 will be used to create a listing on our website and included in our printed Membership Directory. It is available to members as well as the public.

**Renewing?** Please check your information on our website ([michiganacupuncture.org](http://michiganacupuncture.org)) and indicate any corrections in the form below. Please **highlight** any new or changed information, and ~~strike through~~ anything to be removed.

### Section 1 – Public Information

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Name Credentials *Example: DiplAc, OMD, LAc (New York)*

Services Provided

Cell / Pager Public E-mail

Website

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Business Name

Business Address

Business Phone

Business Fax

### Section 2 – Confidential Information

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Did you pass the exams administered by NCCAOM:

Acupuncture?  Yes  No  Have not taken

Chinese herbs?  Yes  No  Have not taken

Are you California State Licensed in Acupuncture?  Yes  No

What is your training in Acupuncture and Oriental Medicine?

Home Phone

Private E-mail Address

What is the best way to contact you?  E-mail  Home tel.  Work tel.  Mobile  Other (list below)

### Section 3 – Renewals

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Did you check your information on [michiganacupuncture.org](http://michiganacupuncture.org)?

Is the information correct?

Yes  No, but I've highlighted the changes that need to be made