

ELECTROLOGISTS' ASSOCIATION OF CALIFORNIA INC.

Est. June 12, 1948



"Pledged to the Highest Standard of Permanent Hair Removal"



NEW MEMBERSHIP APPLICATION

2011 - 2012

It is understood and agreed that this, my application, together with the provisions of the Charter of the Association and those of its By laws and Rules and Regulations as now existing, and as the same may be amended, altered, added to or changed, shall constitute my sole agreement with the Association. It is also understood and agreed that any statement or alleged statement of an officer, or solicitor, if contrary to Charter Bylaws, Rules and Regulation of the Association, shall not be binding.

I herewith make application for membership in the **ELECTROLOGISTS' ASSOCIATION OF CALIFORNIA INC.**, and submit the following information:

TYPE OR PRINT

Applicants Name _____

Business Name (EAC & AEA Roster Information) _____

Business Address _____ City _____ State, _____ Zip _____

Business phone () _____ Cell Phone () _____

Fax () _____ Email Address _____

Send mail to: HOME _____ or OFFICE _____

Home Address _____

_____ Home Phone () _____

Electrology School attended _____ Date Graduated _____

List other training/or apprenticeship program(s) _____

Are you currently in practice? Yes _____ No _____ Full time _____ Part-time _____

CALIFORNIA license # _____ Exp. Date: _____ Do you have an Electrologist license

in any other state? Yes _____ No. _____ List: _____

If you are a prior member, please state previous name (if applicable) and EAC membership# _____

Are you a C.P.E. (Certified Professional Electrologist) Yes _____ No _____ Certification # _____

Modality used:

Multiple Needle _____ Shortwave (Thermolysis) _____ Blend _____ Galvanic _____

Sterilization method used: Autoclave: _____ Dry Heat Oven: _____

**EAC//AEA MEMBERSHIP – FEE SCHEDULE FOR
2011 - 2012**

**The American Electrology Association is an AFFILIATE to Electrolysis' Association of CA. Inc.,
Therefore, your membership dues include both Associations.**

Submit any of the following documentations with application

- 1 Photocopy of diploma from a school of Electrology.
- 2 Photocopy of your state license.
- 3 If applicable - a Notarized affidavit from your apprenticeship instructor, include a copy of your Certificate and number of hours completed in program.

Membership year runs from January 1st to December 31st. Anyone joining EAC/AEA after July 1st and before November 1st shall pay prorated dues for the remainder of current year plus the appropriate dues for the next year.

	Before July 1 st	After July 1 st
EAC annual dues	\$ 85.00	\$ 85.00
Prorated dues for EAC		\$ 40.00
Initiation fee for EAC (one time fee)	\$ 35.00	\$ 35.00
AEA annual dues	\$140.00	\$ 140.00
Prorated dues for AEA		\$ 50.00
TOTAL	<hr/>	<hr/>
	\$ 260.00	\$ 350.00

EAC Donation: \$ _____

EAC Web listing: 1st business no charge

2nd business \$10.00 per year_ \$ _____

Total Enclosed: _____

Would you be interested in serving on one of our committees? Yes _____ No. _____

Program _____ Membership _____ Newsletter _____ Treasury _____

I understand that membership in the **EAC/AEA** is open to Electrologists who practice and/or teach permanent hair removal utilizing needle type devices.

Signature _____ Date _____

(For EAC office use only) Date application received: _____ Payment: _____ Check#: _____

Notes:

Make payment payable to EAC (Electrologists' Association of California)

Mail to

Randa Thurman, L.E. C.P.E.
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