



Society of Ortho-Bionomy International®

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Membership Renewal Form Check if NEW contact information

Please print clearly and include your information below as you wish it to be listed in the Directory.

Name _____ Date _____

Address _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____ Phone (Work) _____

E-mail _____ Website _____

IMPORTANT: Please check one of the options below. If left blank, it will default to electronic newsletters
I prefer to receive correspondence and newsletters **via email electronically** **in the mail**

Please list any changes you would like to make to your listing in our Membership and Skills Directory (25 word maximum please):

United States Members – Please Use This Section

- Friend of OB/E-Newsletter \$25
- Student Member \$55
- Associate Member \$115
- Associate in Practitioner Training \$100
- Practitioner/Advanced Practitioner/Associate Instructor \$150
- Instructor/Associate Intermediate Instructor \$235
- Intermediate/Associate Advanced Instructor \$250
- Advanced Instructor \$275

International Members – Please Use This Section

- Friend of OB/E-Newsletter \$25
- Student Member \$36
- Associate Member \$75
- Associate in Practitioner Training \$65
- Additional \$25 if want hard copy mailings
- Practitioner/Advanced Practitioner/Associate Instructor \$98
- Instructor/Associate Intermediate Instructor \$153
- Intermediate/Associate Advanced Instructor \$163
- Advanced Instructor \$179

Make your **U.S. Bank** check or money order payable to SOBI (**U.S. Dollars**). You may also pay by Visa, MasterCard, Discover or American Express on the SOBI website www.ortho-bionomy.org. You will receive your membership card within 4 weeks after your renewal is processed. If you renew online, please mail or fax in your renewal form and note “paid online.”

Cardholder’s Name _____

Credit/Debit Card Number _____ Expiration Date _____

Zip code of billing address _____ Three digit verification code (in signature block on back of credit card) _____

Signature _____

Community Evolvement Program Credit for Inst/Advise/Coord: Take the amount below off your annual dues
 \$10 if signed up 1-3 new members or training applicants \$25 if signed up 4+ new members or training applicants.

CEUs – Due every two years for Associates and above. You may mail your certificate or include the date, class name, instructor and # of CEU’s completed.

Office Use Only: Member # _____ ACT! _____ Check Date _____ Check Amt _____ Check # _____ Renewal Date _____