**DID YOU KNOW?**

* NOA members have provided FREE visual screenings and vision exams to over 10,000 underserved patients.
* NOA has over 800 members in the U.S., including Puerto Rico and Canada
* NOA has 18 Student Associations with over 700 members
* NOA gives an average of $30,000 in scholarships annually
* Both NOA’s Founders were inducted into the AOA Foundation’s National Optometry Hall of Fame
* NOA has more than 30 national sponsors and contributors

Membership in the National Optometric Association (NOA) is an investment in the future of optometry and eye health. With your enthusiastic support, the NOA will continue to provide you special access to the best our optometric profession has to offer, ensuring that vision education continues to be illuminated through our scholarship funding, education programs and family oriented conventions. Please visit our acclaimed website to view these programs as well as future development.

**RENEW** your membership early or become a NEW member now in support of our mission; "Advancing the Visual Health of Minority Populations.” Member benefits include:

* Networking and camaraderie amongst professionals from different modes of practice
* Involvement in a voluntary speakers' bureau
* Access to world renowned continuing education speakers
* Inclusion of professional practice information in a national directory on our website
* Group discounts
* Communications through newsletters, e-blasts and social media
* Discount on convention registration
* Regional product training and patient referral services

Online registration and payment are available at [nationaloptometricassociation.com](http://www.nationaloptometricassociation.com).

For more information, call 877-394-2020 (toll free) or email [mainoffice@natoptassoc.org](mailto:mainoffice@natoptassoc.org).

**NOA MEMBERSHIP APPLICATION**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name |  | | | | | | Professional Degrees | | |  | | | | | Date |  | |
| Address |  | | | | | City |  | | | | | | St |  | zip |  | |
| Phone (Cell) |  | Phone (Ofc) |  | | | | | | Phone (Hm) | |  | | | | | | |
| Optometry School |  | | | | | | Class Yr | |  | | | | | | | | |
| Email Addresses | (Primary) (Secondary) | | | | | | | | | | | | | | | | |
| Facebook |  | | | | Linked-In | |  | | | | | | | | | | |
| **Dues Schedule** | | | | | | | | | | | | | | | | | |
| * New Graduate | | FREE: 1st 18months of post graduation | | | | | | | | | | | **Dues** | | | | $ |
| * Annual Regular Membership | | $225 | | | | | | | | | | |
| * Corporate / Affiliate | | $225 | | | | | | | | | | |
| **Associate Membership** | | | | | | | | | | | | | | | | | |
| Name |  | | | | | | | Associate Dues | | | $25.00 | | **Association Membership Fee** | | | | $ |
| Email Address |  | | | | | | |
| Cell |  | Facebook | |  | | | | | | | | |
| Other Phone |  | Linked-In | |  | | | | | | | | |
| **NOF Donation** | | | | | | | | | | | | | **NOF Donation** | | | | $ |
| National Optometric Foundation (NOF)  \_\_\_$150 \_\_\_$550 \_\_\_$1,050 \_\_\_0ther\_\_\_\_\_\_ | | NOF Captial Growth Campaign (Annual Pledge)  \_\_\_$500 \_\_\_$1000 \_\_\_$1500 \_\_\_Other $\_\_\_\_\_\_\_\_\_ | | | | | | | | | | |
| **\*\*$5.00 Fee for Credit Card (P&H)** | | | | $ |
| By supporting the **National Optometric Foundation (NOF)** with your tax-deductible contribution, your support will fund educational materials, student scholarships, charitable activities and public service announcements and events. The \***Capital Growth Campaign** was created to support the expense of our organization’s growth and administrative costs. | | | | | | | | | | | | | **Total Amount Paid** | | | | $ |
| **Payment Method** | | | | | | | | | | | | | | | | | |
| 🗆 Check or M.O., **made payable to the** **NATIONAL OPTOMETRIC ASSOCIATION** is enclosed/attached. \*\*To pay by credit card, complete and **sign** the form below. | | | | | | | | | | | | | | | | | |
| \*\*Credit Card # |  | | | | | | CVV Code | |  | | | Expiration Date | | | | |  |
| **\*\*NOTE: All Credit card transactions are subject to a $5.00 flat rate processing and handling fee** | | | | | | | | | | | | | | | | | |
| Signature |  | | | | | | | | | | | | | | | | |

**Mail completed form to 5009 Beatties Ford Rd., Suite 107 #278, Charlotte, NC 28216 or Fax to 877.NOA.2006**

Rev 12-22-14