



APPLICATION FOR STUDENT MEMBERSHIP

For details on other levels of membership, please see www.nhaa.org.au/join-us

Title Surname Gender M / F

First name Middle name/s Date of birth / /

Postal address

Suburb / City State Postcode Country

Telephone Home (.....)..... Work (.....).....

Mobile Email

Student membership *(Membership runs over the financial year).*

Open to those currently undertaking formal studies in herbal or naturopathic medicine. Benefits include online access to the quarterly *Australian Journal of Herbal & Naturopathic Medicine*; regular information updates and E newsletters; student access to the NHAA website and forums; discounts to NHAA events and use of the NHAA library.

Evidence of current student status

Please include evidence that you are a current student with your application. This must include your name, a recent date and an indication of what you are studying. Examples: enrolment receipt, acceptance letter/email, timetable confirmation.

NB: We will request updated evidence each year to show that you are still a current student.

I have attached evidence that I am a current student.

Fees

Student membership is now free for all students enrolled in a directly related discipline (ie. BHSc Nat or WHM)

Prior Membership?

1. Are you a current member of the NHAA? **Yes** *(please skip 2)* **No**

2. Have you previously been a member of the NHAA? **Yes** **No**

If Yes; Membership type or number (if known):

If this was not under your current name, please list previous name:

OFFICE USE ONLY

Membership start date:

New Change Rejoin

Membership number Website access: member added / status changed

Student ID: yes / tba Valid to Final Year FOC applied

Notes: Off archive spreadsheet (rejoin only)

STUDENT MEMBERSHIP DECLARATION

In applying for Student membership with the Naturopaths & Herbalists Association of Australia, I fully understand and agree that as a Student member:

- . I will not use the Association's name, initials or logo nor in any way imply that I am a full member of the NHAA.
- . I have no voting rights and am not eligible to stand for nomination to the Board of Directors.
- . I will not be admitted as a full member until the proper criteria are fulfilled.
- . I will abide by the decisions of the Board of Directors.

Title of course College

Approx. due date of completion (month/year).....

Signed Date

MEMBERSHIP RATES: Student Membership is now FREE!