



www.OPERAok.com

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Application For Professional Membership

Please print clearly the requested information:

Name: Business Name:

Address:

Phone: Email:

Website:

List career history for the past five years, beginning with the present:

Dates Type of Work/Duties City/State

Metaphysical Skills, Gifts, or Products — Please describe briefly:

Total number of years in metaphysical studies? How many years have you worked with the public?

List education and certifications in metaphysical studies you believe to be important. Please include dates:

Please summarize your philosophy:

Have you ever been charged with or convicted of a felony? If yes, please explain on back. No Yes

MEMBERSHIP CHECKLIST

- Membership Fee Paid - Amount Paid
Form 101 Application Completed and Signed
Form 102 Completed and Signed by Each Evaluator
Form 103 Code of Ethics Signed

Member's Signature

Date