



2012 SPECIAL STATUS DECLARATION FORM

Please review the membership categories and policies included in this package prior to completing this form.

2012 Request for Change of Membership Category - Declaration Form

I, the undersigned, declare that I am requesting a change of membership status, as follows:

From (current membership category): _____

To (new membership category): _____

Effective Date (month/day/year): _____

Reason for Change in Status: _____

I have reviewed the membership policies in this package and I understand the policies as they may apply to this declaration.

Name of Member (please print): _____

Signature of Member: _____

Date: _____

2012 Request for Continuance of Part-Time Practitioner Status - Declaration Form

I, the undersigned, declare that I am practicing for no more than sixteen (16) hours per week as a Naturopathic Doctor*. Should I increase the hours at my practice or obtain employment otherwise as a Naturopathic Doctor beyond sixteen (16) hours per week, I understand that I am no longer eligible for part-time dues, and I will report any such change to the Associations forthwith. I understand that Part-Time Practitioner dues entitle me to full benefits for the duration of the 2012 membership year.

Name of Member (please print): _____

Signature of Member: _____

Date: _____

*Practicing as a Naturopathic Doctor includes clinical practice as well as any other employment based on your qualifications as an ND. (e.g. teaching, corporate, or consulting position).

2012 Request for Continuance of Associate Status - Declaration Form

I, the undersigned, declare that I am not practicing as a Naturopathic Doctor in Ontario for one of the following reasons:

Retired

Maternity Leave

Sabbatical

Should I return to practice in Ontario, I understand that I will no longer be eligible for Associate Membership and I will report any such change to the Associations forthwith. I understand that Associate Membership dues entitle me to regular membership benefits (excluding the OAND referral service) for the duration of the 2012 membership year.

Name of Member (please print): _____

Signature of Member: _____

Date: _____