

“Advancing the Visual Health of Minority Populations.”



### Are You a NOA Member?

The NOA provided a remarkable year of engaging seminars with extremely knowledgeable speakers and a fantastic 43rd annual convention in sunny San Diego! We handed out several student scholarships, participated in community service by providing eye exams, and spoke to students about the important role of optometry: Healthy vision is a necessity for all ages.

Paying your dues to NOA is an investment into the future. With your enthusiastic support, the NOA will continue to provide you special access to the best our optometric culture has to offer. What’s more, you will help to ensure that the optometric learning continues to be illuminated through our scholarship funding, educational programs, family oriented convention, and acclaimed website: [www.nationaloptometricassociation.com](http://www.nationaloptometricassociation.com)

Become a NEW member or RENEW your membership now and early to keep supporting our mission, “Advancing the visual health of minority populations.” We need your assistance in reaching our goals. You will continue to enjoy the following benefits:

- Networking amongst professionals of different modes of practice
- Convention registration discount: Access to renowned speakers and continuing education
- Inclusion of your professional practice information in a national directory
- Buying group discounts
- Regional product training and patient referral services

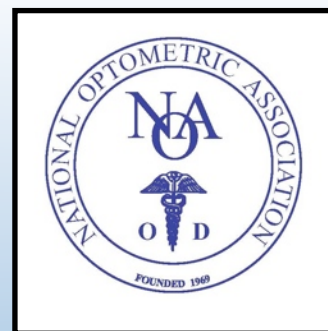
To give the gift of membership or refer a friend call toll FREE 877-394-2020 or email:

[noa.2020@yahoo.com](mailto:noa.2020@yahoo.com)

You can also register or renew your membership online at [www.nationaloptometricassociation.com](http://www.nationaloptometricassociation.com)

## 2012 NOA Membership Form

Name \_\_\_\_\_ Date \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_  
 Optometry School \_\_\_\_\_ Class Year \_\_\_\_\_  
 Facebook/Twitter account Name: \_\_\_\_\_



<b>YEAR 2012 DUES SCHEDULE</b>	
NEWLY GRADUATE MEMBERSHIP: (JUNE 2011-DECEMBER 2012)	FREE
ANNUAL REGULAR MEMBERSHIP:	\$225.00
CORPORATE/AFFILIATE MEMBERSHIP:	\$225.00
DUES PAYMENT ENCLOSED \$ _____	

Tax Deductible Contribution to NOF:     \$150     \$550     \$1050     OTHER

By supporting the National Optometric Foundation with your tax-deductible contribution, you support the work of our foundation whose mission is to support educational programs, charitable activities, public service campaigns and scholarships.

**INDICATE PAYMENT METHOD**

Check/M.O. Payable to NATIONAL OPTOMETRIC ASSOCIATION     MasterCard     Visa     American Express

Credit Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_ Amount \_\_\_\_\_

Email Address \_\_\_\_\_ Signature \_\_\_\_\_