



ATHENA

Association for Therapeutic Eurythmy in North America
in connection with the Medical Section, Dornach, Switzerland

Membership for the Year 2017

Name _____ [] opt out Date _____

Address _____ [] opt out

City _____ State _____ Zip _____ Country _____

Phone _____ [] opt out Fax _____ [] opt out E-mail _____

We share our mailing list with the Medical Section and AAMTA only. AAMTA will include contact info in their practitioner's directory as a service to Full and AnthroMed members for professional referrals unless you mark the opt-out boxes above.

There are four categories of membership. Please check and add \$ amount to the appropriate one:

\$ _____ **ATHENA AnthroMed Certified membership, \$65/year.** For Therapeutic Eurythmists in N. America. This allows use of the AnthroMed trademark on business cards and other advertising info. Includes all other aspects, responsibilities and benefits of full membership. You must complete and return a separate *AnthroMed contract*.

\$ _____ **ATHENA Full membership, \$55/year.** For Therapeutic Eurythmists in North America only. This includes dues to **AAMTA** (Association for Anthroposophic Medicine and Therapy in America), a listing on their practitioner's directory and reduction on conference fees and membership to **IKAM** (Internationale Koordination Anthroposophischer Medizin), an association which works for therapeutic eurythmy impulses internationally.

\$ _____ **Associate membership, \$40/year.** For Therapeutic Eurythmists residing outside North America, for Physicians and Eurythmists.

\$ _____ **Corresponding and Affiliated membership, \$40/year.** For friends and organizations including Waldorf schools, Camphill and other Associations.

\$ _____ *Additional donation for ATHENA*

\$ _____ *Additional donation to Children in Need Fund*

\$ _____ **TOTAL enclosed --- PLEASE make checks out to ATHENA**

Send to: Miyoung Schoen, 4421 Crestridge Road, Fair Oaks, CA 95628

★ **NEW MEMBERS applying for Full Membership**, please enclose copies of your

Recognized Eurythmy Diploma Recognized Therapeutic Eurythmy Diploma

For AnthroMed Certified membership please enclose: Completed Contract for AnthroMed Certification

ATHENA is interested in your area of expertise in the field of Therapeutic Eurythmy: _____

We welcome your suggestions, concerns, workshop ideas, questions and requests. You may include any correspondence with this application. We are interested in your work; please write a line or two or more using back of this application or an additional sheet. This information is only shared with ATHENA's members.

THANK YOU for supporting ATHENA.