



American Electrology Association

An International Organization Incorporated 1958

Gerrelyn Adams, CPE ♦ E7494 A Chip Court ♦ Viroqua, WI 54665

608-637-2214 ♦ gcadams@frontiernet.net

NEW MEMBER APPLICATION

TYPE OR PRINT

Your Name _____

Business Name (for mailing purposes only) _____

Business Address _____

City, State, Zip _____ Phone () _____

Mailing Address (if different) _____

_____ Home Phone () _____

Name of electrolysis school attended _____ Graduation Date _____

List other training/apprenticeship with address and phone _____

Are you currently in practice? _____ In which state are you practicing? _____

In which state are you licensed? _____ State license # _____

Modality used: Multiple Needle _____ Short Wave _____ Blend _____

Have you taken the International Board of Electrologist Certification test? _____ CPE# _____

Submit any of the following documentations:

1. Photocopy of diploma from a school of electrology;
2. Notarized affidavit from your apprenticeship instructor;
3. Photocopy of your state license.

Membership year runs from January 1st to December 31st. Anyone joining AEA after July 1st and before November 1st shall pay prorated dues for the current year plus the appropriate dues for the next year.

	Before July 1 st	After July 1 st
AEA annual dues _____	\$ _____	\$ _____
Prorated dues for AEA (payable from July 1 st to November 1 st) _____	\$ _____	\$ _____
Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ _____
AEA Affiliate State dues _____	\$ _____	\$ _____
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ _____	\$ _____



Make check payable to AEA or charge using the form below and mail to the above address.

CREDIT CARD PAYMENT: VISA, MASTERCARD, DISCOVER (Circle One)

EXPIRATION DATE _____ ACCT. #: _____

SIGNATURE OF CARDHOLDER _____

I understand that membership in the AEA is open to electrologists who practice and/or teach permanent hair removal utilizing needle type devices, and that the privileges of membership may be revoked for noncompliance.

I have read and agree to abide by the AEA code of ethics if I am accepted into membership.

Signature _____ Date _____

(For office use only) Date received:

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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 40.00
AEA Affiliate State dues CALIFORNIA (EAC) _____	\$ 85.00	\$ 85.00
Affiliate State initiation fee (if applicable) _____	\$ 35.00	\$ 35.00
TOTAL	\$ 260.00	\$ 350.00



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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 40.00
AEA Affiliate State dues COLORADO (CAE) _____	\$ 75.00	\$ 75.00
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ 215.00	\$ 305.00



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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 20.00
AEA Affiliate State dues CONNECTICUT (CSEA) _____	\$ 60.00	\$ 60.00
Affiliate State initiation fee (if applicable) _____	\$ 25.00	\$ 25.00
TOTAL	\$ 225.00	\$ 295.00



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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 30.00
AEA Affiliate State dues GEORGIA (GEA) _____	\$ 65.00	\$ 65.00
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ 205.00	\$ 285.00



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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 25.00
AEA Affiliate State dues ILLINOIS (EAI) _____	\$ 60.00	\$ 60.00
Affiliate State initiation fee (if applicable) _____	\$ 5.00	\$ 5.00
TOTAL	\$ 205.00	\$ 280.00



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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 30.00
AEA Affiliate State dues MARYLAND (MAPE) _____	\$ 40.00	\$ 40.00
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ 180.00	\$ 270.00



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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 20.00
AEA Affiliate State dues MASSACHUETTS (MAE) _____	\$ 75.00	\$ 75.00
Affiliate State initiation fee (if applicable) _____	\$ 25.00	\$ 25.00
TOTAL	\$ 240.00	\$ 310.00



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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 20.00
AEA Affiliate State dues NEW HAMPSHIRE (NHEA) _____	\$ 50.00	\$ 50.00
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ 190.00	\$ 260.00



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AEA Affiliate State dues NEW JERSEY (EANJ) _____	\$ 60.00	\$ 60.00
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ 200.00	\$ 270.00



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AEA Affiliate State dues NEW MEXICO (MNEA) _____	\$ 35.00	\$ 35.00
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ 175.00	\$ 245.00



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AEA Affiliate State dues NEW YORK (NYEA) _____	\$ 85.00	\$ 85.00
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ 225.00	\$ 295.00



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TOTAL	\$ 215.00	\$ 285.00



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CREDIT CARD PAYMENT: VISA, MASTERCARD, DISCOVER (Circle One)

EXPIRATION DATE _____ ACCT. #: _____

SIGNATURE OF CARDHOLDER _____

I understand that membership in the AEA is open to electrologists who practice and/or teach permanent hair removal utilizing needle type devices, and that the privileges of membership may be revoked for noncompliance.

I have read and agree to abide by the AEA code of ethics if I am accepted into membership.

Signature _____ Date _____

(For office use only) Date received:

Payment:

Check# / Credit Card



American Electrology Association

An International Organization Incorporated 1958

Gerrelyn Adams, CPE ♦ E7494 A Chip Court ♦ Viroqua, WI 54665

608-637-2214 ♦ gcadams@frontiernet.net

NEW MEMBER APPLICATION

TYPE OR PRINT

Your Name _____

Business Name (for mailing purposes only) _____

Business Address _____

City, State, Zip _____ Phone () _____

Mailing Address (if different) _____

_____ Home Phone () _____

Name of electrolysis school attended _____ Graduation Date _____

List other training/apprenticeship with address and phone _____

Are you currently in practice? _____ In which state are you practicing? _____

In which state are you licensed? _____ State license # _____

Modality used: Multiple Needle _____ Short Wave _____ Blend _____

Have you taken the International Board of Electrologist Certification test? _____ CPE# _____

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Prorated dues for AEA (payable from July 1 st to November 1 st) _____	\$ _____	\$ 50.00
Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 20.00
AEA Affiliate State dues NORTH DAKOTA (EAND) _____	\$ 25.00	\$ 25.00
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ 165.00	\$ 235.00



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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 35.00
AEA Affiliate State dues OREGON (OALE) _____	\$ 70.00	\$ 70.00
Affiliate State initiation fee (if applicable) _____	\$ 10.00	\$ 10.00
TOTAL	\$ 220.00	\$ 305.00



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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 40.00
AEA Affiliate State dues PENNSYLVANIA (PSE) _____	\$ 100.00	\$ 100.00
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ 240.00	\$ 330.00



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Mailing Address (if different) _____

Home Phone () _____

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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 20.00
AEA Affiliate State dues RHODE ISLAND (RIAE) _____	\$ 35.00	\$ 35.00
Affiliate State initiation fee (if applicable) _____	\$ 25.00	\$ 25.00
TOTAL	\$ 200.00	\$ 270.00



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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 20.00
AEA Affiliate State dues SOUTH CAROLINA (SCAE) _____	\$ 75.00	\$ 75.00
Affiliate State initiation fee (if applicable) _____	\$ 25.00	\$ 25.00
TOTAL	\$ 240.00	\$ 310.00



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Mailing Address (if different) _____

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Name of electrolysis school attended _____ Graduation Date _____

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Are you currently in practice? _____ In which state are you practicing? _____

In which state are you licensed? _____ State license # _____

Modality used: Multiple Needle _____ Short Wave _____ Blend _____

Have you taken the International Board of Electrologist Certification test? _____ CPE# _____

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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 20.00
AEA Affiliate State dues TENNESSEE (EAT) _____	\$ 25.00	\$ 25.00
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ 165.00	\$ 235.00



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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 20.00
AEA Affiliate State dues TEXAS (TAPE) _____	\$ 40.00	\$ 40.00
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ 180.00	\$ 250.00



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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 20.00
AEA Affiliate State dues UTAH (UPGE) _____	\$ 35.00	\$ 35.00
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ 175.00	\$ 245.00



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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 20.00
AEA Affiliate State dues VIRGINIA (VEA) _____	\$ 35.00	\$ 35.00
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ 175.00	\$ 245.00



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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 20.00
AEA Affiliate State dues VERMONT (AVE) _____	\$ 40.00	\$ 40.00
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ 180.00	\$ 250.00



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Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ 30.00
AEA Affiliate State dues WASHINGTON (WSEA) _____	\$ 60.00	\$ 60.00
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ 200.00	\$ 280.00



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Prorated dues for AEA (payable from July 1 st to November 1 st) _____	\$ _____	\$ 50.00
Prorated Affiliate dues (payable from July 1 st to November 1 st) _____	\$ _____	\$ _____
AEA Affiliate State dues UNAFFILIATE _____	\$ _____	\$ _____
Affiliate State initiation fee (if applicable) _____	\$ _____	\$ _____
TOTAL	\$ 165.00	\$ 215.00



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3. Photocopy of your state license.

Membership year runs from January 1st to December 31st. Anyone joining AEA after July 1st and before November 1st shall pay prorated dues for the current year plus the appropriate dues for the next year.

	Before July 1 st	After July 1 st
AEA annual dues INTERNATIONAL	\$ 200.00	\$ 200.00
Prorated dues for AEA (payable from July 1 st to November 1 st)	\$ _____	\$ 50.00
Prorated Affiliate dues (payable from July 1 st to November 1 st)	\$ _____	\$ _____
AEA Affiliate State dues	\$ _____	\$ _____
Affiliate State initiation fee (if applicable)	\$ _____	\$ _____
TOTAL	\$ 200.00	\$ 250.00



Make check payable to AEA or charge using the form below and mail to the above address.

CREDIT CARD PAYMENT: VISA, MASTERCARD, DISCOVER (Circle One)

EXPIRATION DATE _____ ACCT. #: _____

SIGNATURE OF CARDHOLDER _____

I understand that membership in the AEA is open to electrologists who practice and/or teach permanent hair removal utilizing needle type devices, and that the privileges of membership may be revoked for noncompliance.

I have read and agree to abide by the AEA code of ethics if I am accepted into membership.

Signature _____ Date _____

(For office use only) Date received:

Payment:

Check# / Credit Card