

**OPTICIANS ASSOCIATION OF ILLINOIS**

**Membership Application**

PO Box 9283 – Peoria, Illinois 61612

1-800-437-4476 Email [info@illinoisopticians.com](mailto:info@illinoisopticians.com) <http://www.IllinoisOpticians.com>

**PLEASE PRINT NAME EXACTLY AS YOU WANT IT TO APPEAR ON MEMBERSHIP CERTIFICATE**

Name \_\_\_\_\_ Application Date \_\_\_\_\_

Address \_\_\_\_\_ New \_\_\_\_\_ Renewal \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Direct Mail to: Home or Office

Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

Company name \_\_\_\_\_

.Address \_\_\_\_\_ Length of Employment \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Employed by: Self \_\_\_\_\_ MD \_\_\_\_\_ OD \_\_\_\_\_ Lab \_\_\_\_\_ Optician \_\_\_\_\_ Chain \_\_\_\_\_ Other \_\_\_\_\_

**Professional Certifications:**

ABO# \_\_\_\_\_ Expiration date \_\_\_\_\_

JCAHPO# \_\_\_\_\_ Expiration date \_\_\_\_\_

ABOM# \_\_\_\_\_ Expiration date \_\_\_\_\_

STATE LICENSE# \_\_\_\_\_ Expiration date \_\_\_\_\_

NCLE# \_\_\_\_\_ Expiration date \_\_\_\_\_

**Professional Affiliations: Circle all that apply**

OAA \_\_\_\_\_ NAO \_\_\_\_\_ PRO \_\_\_\_\_ CLSA \_\_\_\_\_ FHOAA Other \_\_\_\_\_

Education Level: High School \_\_\_\_\_ Associate \_\_\_\_\_ Bachelor's \_\_\_\_\_ Other \_\_\_\_\_

**In submitting this application, I agree to abide by the bylaws of the association and adhere to the Code of Ethics. I also understand that the Board of Directors of the Opticians Association of Illinois will approve all applications.**

Applicants Signature \_\_\_\_\_

**Membership Applied For:**

REGULAR \_\_\_\_\_ \$100 Any person ABO / NCLE certified and/or Optician State License and/or has dispensed for at least three years.

ASSOCIATE \_\_\_\_\_ \$50 Any person who does not qualify for regular membership and has dispensed for less than three years.

PATRON \_\_\_\_\_ \$100 Any organization supporting the Principals of the Association.

Mail completed application to the above address. If you have any questions call the 800 number above.