

Society to Advance Opticianry

2309 Sudderth Drive, Ruidoso, New Mexico 88345

www.opthalmicoptician.org / info@opthalmicoptician.org

Ophthalmic Optician (O.O.) APPLICATION

By Mail or Email Fill out and send in with check or credit card information.

Name* _____ Accreditation Suffix (ABOC, NCLEC, COA, CPOA) _____

Street Address* _____

City* _____ State* _____ Zip Code* _____

Email * _____

Phone* _____ Fax* _____

State License Numbers (if applicable) _____ / _____

College Attended _____ Degree _____

College Address (city & State) _____ Date of Degree _____

Please attach a photocopy of your certificate from your college, a photocopy of your license if applicable, and a photocopy of your ABO, NCLE, COA, or CPOA certifications with this application.

Check Type of Membership and Dues Rates:

Candidate Membership **One Time Fee** (No documentation needed*) (NFOS students FREE) \$25.00

Application fee (**includes VAS course fee & 1st full year's Membership Dues as an O.O.**) \$199.00

Renewal Annual dues are for January 1st through December 31st \$59.00

Opticianry Student Scholarship Sponsorship and New Certification Program (Donations)..... \$ _____

(Referred by* _____)

Method of Payment*: Check enclosed payable to SAO MasterCard Visa AE

Card Number _____ Exp. Date _____ V Code _____

Signature _____

SAO Membership Dues are considered tax deductible, as a business expense only.

Scholarship Donations and New Certification Programs are fully 501c3 Tax Deductible.