

**CANADIAN PRANIC HEALERS' ASSOCIATION**  
[www.pranichealing.ca](http://www.pranichealing.ca)

**MEMBER INFORMATION – PLEASE PRINT CLEARLY**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: Important! \_\_\_\_\_

**1. PRACTITIONER MEMBER**

**Practitioners: Please check level:** Associate: \_\_\_\_\_ Certified: \_\_\_\_\_ Teacher: \_\_\_\_\_

I will participate in the insurance scheme: \_\_\_\_\_ Yes

➤ Feature me on the web page: \_\_\_\_\_ Yes \_\_\_\_\_ No

**If yes, we will use your name and email as featured above. Photo optional.**

**2. STUDENT PRANIC HEALER**

➤ I am not an Associate or Certified Pranic Healer \_\_\_\_\_

**3. CPHA Dues Schedule for year from Jan. to Dec.**

- 1. Pranic Healing Students (non-associates) .....\$25.00
- 2. Associate not wanting to be listed on website .....\$25.00
- 3. Associates Pranic Healers and higher .....\$50.00
- 4. Instructors/Centre Directors-Coordiators.....\$100.00

**4. PAYMENT METHODS:**

a) PAYPAL from the [www.pranichealing.ca](http://www.pranichealing.ca)

b) Cheque (Payable to Canadian Pranic Healers' Association)

**Mail form and payments to:**

Jyoti Dekate; [rejuvenate@bodhiwellbeing.com](mailto:rejuvenate@bodhiwellbeing.com)

102 Scimitar View NW, Calgary Alberta T3L 2B5