

**NEW HAMPSHIRE OPTICIANS SOCIETY  
RENEWAL 2019 MEMBERSHIP**

Your 2019 membership is now due. As the Executive Board needs to maintain a current data base, it is important to take a few minutes to answer **ALL** the questions below.

NAME \_\_\_\_\_

PLACE OF BUSINESS \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE#      WORK \_\_\_\_\_ CELL \_\_\_\_\_ HOME \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

<u>MEMBERSHIP STATUS:</u>	<b>CERTIFIED</b>	<b>REGULAR</b>	<b>ASSOCIATE</b>	<b>STUDENT</b>
<b>DUES:</b>	<b>\$100.00</b>	<b>\$100.00</b>	<b>\$50.00</b>	<b>\$35.00</b>

**OPTICAL MEMBERSHIPS:**    ABO CERT# \_\_\_\_\_    NCLE CERT# \_\_\_\_\_

Do you have a valid license in any other state? \_\_\_\_\_ Where \_\_\_\_\_

Please mail your payment to:  
NHOS c/o Sally Kreger  
PO Box 8  
Manchester NH 03105

**10% DISCOUNT IF PAID BY NOVEMBER 1, 2018**

**\*PLEASE NOTE: CHECKS RECEIVED AFTER NOV 1<sup>ST</sup> MUST BE  
PAID AT THE REGULAR RATE NOT THE REDUCED RATE\***

