



**MEDICAL FITNESS ASSOCIATION
MEMBERSHIP APPLICATION**

- Professional Individual Member:** Refers to individuals (PT, OT, RN, RD and other exercise and health professionals) associated with a healthcare institution or medical fitness center (\$255)
- Facility Member:** ONE location/site may list unlimited individuals to receive all benefits of a Professional Membership
New Facility: \$850 Additional Facility: \$600 For the First Year
Renewing Facility: \$850 Additional Facility: \$600 Year Two and Beyond
- Student Member:** Open to currently enrolled full-time students (12 hours or more) at an accredited academic institution in a health or sports related field of study. Proof of student status and current enrollment required. (\$25)
- AKTA Dual Member:** Refers to individuals who also hold a membership with the American Kinesiotherapy Association. Membership at this level will be verified with AKTA. (Contact the AKTA)

Facility Size (sq.ft.) _____ Payment Enclosed \$ _____ (Note: Purchase Orders Not Accepted)

Total # of Members _____ Average Age _____

Name: _____ Title: _____

Facility/Company: _____ Email Address: _____

Address: _____

City/State/Zip: _____ Phone: _____ Fax: _____

All Major Credit Cards Accepted: MasterCard Visa American Express Discover Other _____

Card Number: _____ CVV Code: _____

Expiration Date: _____ Signature: _____

If you selected Facility Membership, you will be contacted by a Medical Fitness Association staff member for employee information.

For questions, please contact Jason Aslanian, Membership Experience Director at jason.aslanian@medicalfitness.org.
Medical Fitness Association Tax ID # 36-4259889

****Membership dues are non-refundable****

Medical Fitness Association
90 Cherokee Road, Suite 3A • Pinehurst, NC 28374
(910) 420-8610 • www.medicalfitness.org

27 Years of Prevention Through Active Lifestyles