



UNIVERSAL FORCE INTERNATIONAL NAAM YOGA ASSOCIATION

REGISTRATION FOR CERTIFIED NAAM YOGA TEACHERS

To register, complete the form below, and submit with the following:

- \$75.00 annual General Membership fee (for all applicants: US Funds ONLY, by credit card, personal check through a US bank, or International money order – please make checks payable to: “Universal Force International Naam Yoga Association”.)
- Forms and fees can be sent via postal mail or priority service. They should be addressed to:
Universal Force Healing Center, c/o Universal Force International Naam Yoga Association, 7 West 24th Street, New York, NY 10010.
- When paying by credit card, you may fax your application to 413-639-8903.

*I am a current member of the Universal Force International Naam Yoga Association and am renewing my membership (check here) _____

CONTACT INFORMATION. Please Print or Type. The following information will be posted in our online directory. If you do not wish all or part of your contact information published, please check the DNP (Do Not Publish) box at the end of each entry. Please print clearly.

Name: _____ DNP _____
 First Middle Last

Address: _____ DNP _____
 Street Apt

_____ DNP _____
 State Zip Country

Phone: _____ DNP _____ Other contact # _____ DNP _____

Email: _____ DNP _____

Website: _____ DNP _____

It is acceptable for the Universal Force International Naam Yoga Association to contact me by email for correspondence: Yes No

I prefer another way of correspondence. Please describe: _____

ETHICAL STANDARDS AND CONTINUING EDUCATION:

Universal Force International Naam Yoga Association requires all certified Naam Yoga Teachers and Students to sign and adhere to the Code of Ethics Agreement (to be kept on file with the Association). In addition, it is essential that Naam Yoga Teachers and Students remain current with the teachings and practice of **Naam Yoga** as stated in the Code of Ethics Agreement.

LEGAL AGREEMENT:

Universal Force International Naam Yoga Association retains the right to review my credentials at any time. At any time Universal Force International Naam Yoga Association may revoke my membership or right to use the registered title for cause, including failure to uphold the standards set forth in the Universal Force International Naam Yoga Association Code of Ethics including the Continuing Education Requirements. By my signature below, I affirm that I meet the requirements of the Universal Force International Naam Yoga Association. All information I have provided in connection with this application is true to the best of my knowledge. I hereby agree to meet the conditions set forth above. I understand that falsifying information in connection with this application will result in revocation of these privileges. I agree to meet all conditions imposed by Universal Force International Naam Yoga Association in order to maintain these privileges.

Signature: _____ Date: _____

Credit card to be used (please choose one) : MasterCard _____ Visa _____ AmEx _____

Name of Applicant: _____

Name as it appears on your card: _____

Card # _____ Exp. Date ____/____^{CC} Verify # _____ (3 digit # on back of CC)

Billing Address _____

Street _____ Apt # _____

City _____ State _____ Zip _____ Country _____

Signature: _____ Date: _____

Contact Information:

Universal Force Healing Center
c/o Universal Force International Naam Yoga Association
7 West 24th Street, New York, NY 10010
Phone: 646-291-6383
Email: association@naamyoga.com
Web-Address: <http://www.naamyoga.com/association/>

*Naam Yoga™ has been registered with the Federal Trade-Mark Office by Universal Force Inc.