



Health Action Network Society

HANS Supports Your Business

Support HANS as a Professional Member (\$180/year) and receive these benefits and more:

- Up to 150 copies of each quarterly issue of *Health Action* magazine
- Listing in the HANS Wellness Directory in each issue and at www.hans.org
- Show community spirit by contributing to a non-profit, non-government-funded, natural health charity
- 25% off display advertising in *Health Action* magazine, (90,000 readers)
- Get involved; story/event ideas, networking opportunities and more

Professional Membership Application Form

Please complete this form and mail or fax to the HANS office for review

#202 – 5262 Rumble Street, Burnaby BC V5J 2B6

Ph: 604.435.0512 Fax: 604.435.1561

Your Name:

Select: List before Business name, or List after Business name, or Do Not List.

Business Name:

Mailing Address:

City:

Province:

Postal Code:

Business Phone:

Business Fax:

Main Contact Person (NOT PUBLISHED):

Web site Address:

Other Contact Number (NOT PUBLISHED):

E-mail Address:

Do not Publish Mailing Address

Do not Publish Web site Address

Yes, we would like to offer an ongoing discount to HANS members (please attach details.)

Do not Publish Business Fax

Do not Publish E-Mail Address



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***Please include the following with this application

—Copies of Professional Certification

—Write-up (optional — MAXIMUM 75 WORDS) This write up for the online directory is searchable by keyword and should include a description of your business/philosophy/specialties/products/services.

Payment Options

Professional Membership and Directory Listing

Please note: Multiple Locations are treated as separate listings, for example, 3 locations will be \$23/mo or \$280/year. Please include additional addresses separately.

- One category/location - \$180/year or \$15/month
- Two categories/locations - \$230/year or \$19/month
- Three categories/locations - \$280/year a month or \$23/month

My Category Choice(s) - See category list next page

Category One _____

Category Two _____

Category Three _____

I would like to pay continually by month by automatic withdrawal. (\$15, \$19, or \$23 per month)

- Direct Debit (please fax or mail VOID Cheque with application)
on the ___ 1ST OR ___ 15TH of month
- Visa/Mastercard/Amex # _____ exp _____
on the ___ 1ST OR ___ 15TH of month

I would like to pay annually. (\$180, \$230, or \$280 per year)

- Cheque payable to HANS
- Visa /Mastercard/Amex # _____ exp _____
(may also be faxed to (604) 435-1561)

Date _____ **Signature** _____



Health Action Network Society **HANS Directory Categories**

(Please provide a copy of certification for health modalities)

Acupuncture and Chinese Medicine	Health & Education Centres	Nutritional Consulting
Animal/Pet Holistic Health Care	Health Coaches	Organic Products/Services
Aromatherapy	Health Food Stores	Orthomolecular Medicine
Assessments	Health Products/Equipment	Osteopathic Practitioners
Associations & Non-profits	Health Retreats & Spas	Prof/Business Friends of HANS
Ayurvedic Medicine	Healthy Homes	Personal Development
Biofeedback	Herbalists (Registered)	Psychologists
Business Opportunities	Herbs & Herbal Products	Publications
Cancer Information/Treatments/Support	Homeopathy	Reflexologists
Children's Health	Hyperbaric/Oxygen Therapy	Rehabilitation
Chiropractic	Hypnotherapy	Reiki
Cleansing/Detoxification	Inspiration	Saunas
Colon Hydrotherapy	Iridologists	Shiatsu
Counsellors (Registered)	Kinesiology	Skin and Hair Care
Craniosacral Therapy	Massage Therapists (Registered)	Support Groups
Dentists	Medical Doctors	Theta Healing
Electromagnetic Fields and Radiation	Meditation	Weight Management
Energy Medicine	Mental and Emotional Wellness	Wellness Centres
Environmental Products/Services	Naturopathic Physicians	Women's Health
Food & Cuisine	Nurses (Registered)	Yoga

I would like to be more involved with HANS!

___ Yes, I would like 50___ 100___ 150___ additional magazines per issue. (check one)

___ Yes, I would like to request a copy of the *Health Action* magazine advertising package (professional members receive a 25% discount).

___ Yes, I would like to be interviewed for inclusion on the HANS website (HANS will contact you).

___ Yes, I have a story idea I'd like to see covered in the magazine (please email editorial@hans.org).

___ Yes, I have written a book and would like to donate a copy to the HANS library.

___ Yes, I am interested in speaking at a future HANS event. (please indicate topic and details)

Please keep us up-to-date on what you are doing! We love hearing from our professional members. HANS members also love to attend events, so feel free to post your events on our site under the Community Events section. It's very easy at www.hans.org.

Looking forward to working with you,

The HANS Team