

BODY-MIND CENTERING®

association, inc.

Body-Mind Centering® Association, Inc.

P.O. Box 710 • South Hadley, MA 01075-0710 • www.bmcassociation.org

Please complete the following form to apply for BMCA membership.

*Note: All fields marked with an asterisk * are required.* QUESTIONS: Contact admin@bmcassociation.org

Email Address* _____

Username: Your Username will be your first and last names, with no space in between. **For example: MaryJones.** A temporary password will be assigned to you that you can change by logging in to the website and selecting one of your choosing. BMCA does not record password information.

User Name: (First Name, no space, Last Name) _____

First Name* _____ Middle Initial _____

Last Name* _____

Address* _____

City* _____ State/Province* _____

Postal Code* _____ Country* _____

Home Phone * _____ Mobile Phone * _____

Occupation _____

Additional Certifications or licenses: _____

Areas of Special Interest: _____



All Members - Display above Information in the Membership Directory on the BMCA website (if not selected you will not appear in the Membership Directory)

You may leave out the following information if it is **the same** as the information above. Write "SAME".

Business Name _____

City _____ State/Province _____

Postal Code _____ Country _____

Business Phone _____ Mobile Phone _____

Web Address/Social Media Handles _____

Professional Members Only - Display above Information in the Membership Directory on the BMCA website (if not selected you will not appear in the Membership Directory)



BMC Certified Program Attended:

Certified Teacher (CT) Location _____ Year _____

Certified Practitioner (CP) Location _____ Year _____

Somatic Movement Educator (SME) Location _____ Year _____

Infant Developmental Movement Educator (IDME) Location _____ Year _____

Embodied Anatomy & Yoga (EAY) Location _____ Year _____

Embodied Developmental Movement & Yoga (EDMY) Location _____ Year _____

I am actively enrolled in a BMC program.
Name of BMC Program: _____

I am not actively enrolled in a program, but I am studying BMC with a Professional Teacher member.
Name of Professional Teacher member: _____

I am a currently enrolled college student. Name of college: _____

AGREEMENT:* All members must indicate agreement with the statement below by signing your initials on the line below. Your membership will be delayed if you do not initial below.

I have read and I agree to abide by BMCA'S Code of Ethics, Standards of Practice, and Teachers' Guidelines which can be found at the following address:
<https://bmcassociation.org/members>

Note: If a copy of these documents was not included with this application, and you do not have access to the Internet so you can view these documents online, please contact BMCA at admin@bmcassociation.org to receive a copy in the mail.

Additionally, all professional members are required to read and follow the Service Mark Guidelines, and are required to sign a sublicense agreement each year agreeing to the terms of use for the Service Mark. BMCA will send you these documents via e-mail (preferred method), or you may request them sent to you in the mail. If you are applying for professional membership, please indicate which method you prefer for receiving the Service Mark Guidelines and the Sublicense Agreement. The BMCA office must receive a signed copy of the sublicense agreement before your membership will become active. You can scan and e-mail the signature pages of the agreement, or send a signed copy through the mail to the BMCA office.

Please e-mail me a pdf file of the Service Mark Guidelines and the Sublicense Agreement.

Membership Fees

Three Year Membership Rates are discounted by 7%. (Note: Professional membership includes a \$50/€40 annual Professional Mark Fee*. This fee is not eligible for the 7% discount.) **This discount is not applicable with any other discounts – such as BMC France, Glia or ISMETA.**

Please visit <https://bmcassociation.org/> for current EU pricing

<u>Membership Level</u>	<u>One Year</u>	<u>Three Years</u>
BMCA Professional Membership*	\$175 USD	\$499 USD
BMCA Associate Membership**	\$65 USD	\$182 USD
BMCA Student *** or Friend	\$50 USD	\$140 USD
Library or Institution	\$100 USD	\$279 USD

- ** 80% of the Mark Fee is paid to the Mark Holder and originator of BMC, Bonnie Bainbridge Cohen, for the use of the Term Body-Mind Centering in publicity and professional endeavors and remainder assists BMCA in legal protection of the Mark. The other 20% covers administrative costs related to the Professional Mark.*
- *** SBMC Certified, but not working as a professional in the field, Cannot use term Body-Mind Centering in publicity or professional endeavors – can include BMC in biographical information*
- **** Student of Somatic Training or Undergraduate College*

YES, I WANT TO BECOME A MEMBER OF BMCA:

Approval of Marketing Materials

Professional members are required to have their marketing materials approved for proper usage of the BMC Service Marks (the content is not otherwise reviewed.) This includes flyers, business cards, websites, and other publicity materials. Please send in your marketing materials scanned to email, if possible, to: admin@bmcassociation.org or mail them to BMCA. Your Professional membership will not be complete until this requirement is met. If you DO NOT HAVE any marketing materials, this requirement does not apply to you. If you subsequently develop marketing materials, they must be approved. If you have questions, contact: admin@bmcassociation.org




I am sending in my marketing materials for approval. Website URL: _____

I do not have any marketing materials at this time.

1. Member Level: _____ \$ or €: _____
2. Current ISMETA Members may subtract \$15/1 year or \$45/3 years* (_____)
3. Current BMC France or GLIA members may subtract
\$15/1 year or \$45/3* years (_____)
(only one discount allowed in this category – BMC France or GLIA)
4. Do you wish to make a tax-deductible Contribution to BMCA? _____
5. TOTAL _____

** Reminder you cannot receive the discounted 3 year Professional Member Rate if you are taking additional discounts*

Payment Options:

-  Euros – from EU only (see wiring instructions below)
**Due to Brexit this is no longer an option for our UK members
-  Credit Card (in U.S. funds)
-  Check (US only) or Money Order (in U.S. funds)

Paying by Euros:

Direct Deposit of Euros: When making your direct deposit, please indicate your name

(Swiss members please add €5 for bank fees in addition to the membership fee.) TransferWise instructions:

Bank code (SWIFT / BIC): TRWIBEB1XXX

IBAN (to receive EUR from the EU only): BE40 9670 3651 0863

TW Account Holder: Body-Mind Centering Association, Inc Address:

TransferWise Europe SA Avenue Louise 54, Room S52

Brussels

1050

Belgium

Paying by Credit Card:

_____ VISA _____ MasterCard _____ AMEX

Card # (no hyphens/dashes): _____

Expiration Date: Month _____ Year _____ CVV Code _____

Billing Zip Code: _____

Name as it appears on Card: _____

Signature: _____

Credit card information is not stored by BMCA. All numbers are destroyed after they have been processed.

Paying by Check (US only) or Money Order (U.S. Funds):

Please mail your check or money order with this completed application to:

The Body-Mind Centering Association, Inc
P.O. BOX 710
South Hadley, MA
01705-0710
United States

If any information is missing from your application, you will be contacted by BMCA before processing can be completed. After your BMCA application and your payment have been processed, you will receive confirmation of your membership.

Thank you for applying for BMCA membership!

Questions: The best way to contact the BMCA is through e-mail at admin@bmcassociation.org