

Membership Renewal/Update Form

Renewal ____

Personal Information Update Last Name First Name Middle Initial Cell Number Home Number Email Address City State Zip Code Reiki Level (additional levels since original application) From whom did you learn? (Include teacher's name, email address and telephone number) Occupation, Other Healing Arts, Training, Certificates: Website Information (If you want your information on the San Diego Reiki Corps website please complete the information below) Please note the information provided needs to be relevant to Reiki) Name Style of Reiki (eg. Usui or Karuna or Jikiden etc) Title (eg. Reiki Practitioner or Reiki Master Practitioner or Reiki Master Teacher and Practitioner) Email Credentialed Organization (eg CEU Provider" BRN # xxxxxx) Website (Max of two – One for business and one for Meetup) Signed: _____ Date: ____

To update contact information return this form via e-mail or mail to the SDRC office. If Reiki status has changed, also send a copy of new Reiki Certificate.

Print Name:

To renew membership return this form via e-mail and pay renewal online to:

Membership@SanDiegoReikiCorps.org

<u>OR</u>

Mail \$30.00 check payable to SDRC with renewal form to: SDRC, 3231-C Business Park Drive, #213, Vista, A 92081