



2011 Membership Application

Louisiana Association of Dispensing Opticians

209 Constitution Drive Lafayette, LA 70503 337-344-3309 www.lado.org

New Member Established Member (LADO cert # _____) if known

I PREFER TO BE CONTACTED BY: EMAIL ONLY REGULAR MAIL ONLY BOTH

Your Name: _____

Today's Date: _____

Cell Phone: _____

Alternate Phone: _____

Email: _____

Years in Optical Business: _____

Preferred Mailing Address: _____

City, State, Zip: _____

Employer/business name: _____

Phone: _____

If you work for an O.D. or M.D., please give their name: Dr. _____ MD / OD

Employer Address: _____

City, State, Zip: _____

PRINT NAME TO APPEAR ON CERTIFICATE: _____

- I am applying as a:
- Certified Member (ABO-NCLE)* \$95.00 Cert # _____
 - Regular Member (non-certified optician) \$95.00
 - Associate Member (student, non-practicing optician, or wholesale optical rep) \$45.00
 - Life Member (a member in good standing for at least 10 years and is retired) \$25.00

Please mail your completed application and check or money order payable to **La. Association of Dispensing Opticians** to:
LADO
Phil Coker, President
209 Constitution Dr.
Lafayette, LA 70503

Signature: _____ Date: _____

How did you hear about LADO? _____

- I will recruit one new member for a \$25 Visa Gift Card
- I will recruit more than 1 new member (\$25 Visa Gift Card for each new member!)**



- Membership in LADO entitles you to individual membership in Opticians Association of America.
- Your completed application and payment will confirm LADO membership for the 2011 calendar year.
- Want to refer a friend? You will get a \$25 recruitment bonus for every optician you refer that becomes a member! Additional membership applications are available on our website, www.lado.org

Dues shall be arrears as of January 31, 2011. Any member who is in arrears will be required to pay non-member rates at the annual meeting. Any member who has not paid dues by the annual meeting shall have his/her voting privileges withheld.