

APPLICATION FOR  
KAWP

COMPLETE  
THIS FORM

EMAIL OR MAIL TO

EMAIL

[info@kawp.net](mailto:info@kawp.net)

PHYSICAL ADDRESS

880 Corporate Dr.

Unit 202

Lexington,

Kentucky 40503



DATE \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

# KENTUCKY ASSOCIATION OF WELLNESS PROFESSIONALS

## CUSTOMER INFORMATION:

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Address: \_\_\_\_\_  
Social Media: \_\_\_\_\_  
Credit Card Information: \_\_\_\_\_

## PREMIUM PROFESSIONAL - \$299.99

- All Basic Practitioner Membership perks.
- Priority promotion in our directory for increased client reach.
- Featured spot in our monthly newsletter to showcase expertise.
- Opportunity to contribute to our community.

### Professional Category

Personal Trainer, Athletic Trainer, Massage Therapist, etc

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Are you interested in providing discounts to other KAWP Members, if so describe them below.

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## STANDARD PROFESSIONAL - \$199.99

- Access to our exclusive network for independent wellness practitioners.
- Profile listing in our practitioner directory for client visibility.
- Regular newsletters featuring industry insights and tips.

### Professional Category

Personal Trainer, Athletic Trainer, Massage Therapist, etc

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