



THE FOUNDATION FOR SHAMANIC STUDIES

## 2023 - 2024 CIRCLE OF THE FOUNDATION MEMBERSHIP APPLICATION

**VIEW BENEFITS OR JOIN US ONLINE at SHAMANISM.ORG**

Join: <https://shamanism.org/join/index.html>

Membership benefits: <https://shamanism.org/join/benefits.html>

**Membership gift/Members Area: Classic articles by and about Michael Harner**

*Waiting for Inca God* (©Shamanism Annual, December 2018, Issue 31)

Profile: *Michael Harner, Beating the Drum for Shamanism* (New Realities, 1988)

### JOIN BY MAIL or FAX

Complete the form below and mail or FAX to:

FSS

P.O. Box 1010 Pacifica, CA 94044

FAX: 888-449-4755

[info@shamanism.org](mailto:info@shamanism.org)

#### CHOOSE YOUR MEMBERSHIP:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Check if you are renewing             | <input type="checkbox"/> \$120 Sponsoring (paid annually)                              | <input type="checkbox"/> \$500 Council (paid annually)                              |
| <input type="checkbox"/> \$55 Regular Membership               | <input type="checkbox"/> \$12 Sponsoring (12 monthly auto payments - credit card only) | <input type="checkbox"/> \$50 Council (12 monthly auto payments - credit card only) |
| <input type="checkbox"/> \$45 Discount price thru Oct 27, 2023 |  |   |

NAME \_\_\_\_\_

First

Middle

Last

ADDRESS \_\_\_\_\_

Street

City

State

Zip

Country

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

#### CHECK OR MONEY ORDER

Payable to: Foundation for Shamanic Studies (FSS). If a monthly payment membership is chosen, **enroll using your credit card.**

*FSS is a 501(c)(3) tax-exempt public charitable organization. Donations are tax-deductible to the extent allowed by law.*

CHARGE my:  VISA  MASTERCARD  DISCOVER  AmerEx

CARD # \_\_\_\_\_ EXP. DATE \_\_\_\_\_ SEC. CODE \_\_\_\_\_

I wish to add an additional one time donation of \$ \_\_\_\_\_ to my membership.

TOTAL \$ \_\_\_\_\_ SIGNATURE \_\_\_\_\_

**PLEASE LIST** my name and phone number in the Voluntary Telephone Directory in the *Shamanism (Annual)* as follows (if desired, you may note your masters or Ph.D. degree after your name):

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

To be included in the Annual Voluntary Telephone Directory in the **2024** issue of *Shamanism (Annual)* join or renew **no later than November 11, 2024**. Otherwise, your listing will appear in the 2025 Directory. Check all designations below that apply to you:

- |  |   |
|--|---|
| <input type="checkbox"/> Graduate of an FSS Two-Week Shamanic Healing Intensive        | <input type="checkbox"/> Completed the Shamanic Healing Training Program ( <b>in-person</b> ) |
| <input type="checkbox"/> Graduate of an FSS Three-Year Program in Advanced Shamanism   | <input type="checkbox"/> Accepted clients for shamanic healing for _____ # of years           |
| <input type="checkbox"/> I am a <i>Certified Shamanic Counselor</i> ® (Harner Method)  | <input type="checkbox"/> Accepted clients for shamanic divination for _____ # of years        |
| <input type="checkbox"/> Completed FSS Five-Day Harner Shamanic Counseling Workshop    | <input type="checkbox"/> Yes, include me in the <b>online</b> Shamanic Services listings      |
| <input type="checkbox"/> Completed the <b>Online</b> Shamanic Healing Training Program |   |