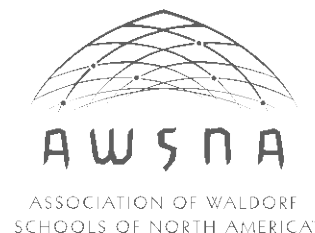


**Application for Affiliation with the
Association of Waldorf Schools of North America**



Type of organization (school/institute):

Organization name:

Address, City, St/Province:

Organization phone:

Organization website:

Contact name:

Contact phone:

Contact email:

Please share your interest/intent in becoming a school/institute affiliate of our Association (please use as much space as is needed to answer this question):

Applicant agrees to comply with all policies and procedures of the Association of Waldorf Schools of North America (“AWSNA”), including the terms of the Membership Guide. See AWSNA Membership Guide for additional information and details. The details of this aspect of the application process will be worked out with the appropriate regional Leadership Council Member for AWSNA.

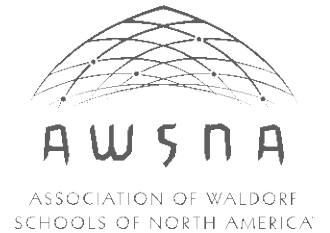
1. Application Fee Sent/Included:
2. Applicant has reviewed the Membership Guide and agrees to adhere to the affiliation criteria, including, but not limited to commitment to¹:
 - a. Progress towards full membership within the stated timeframes:
 - b. Fulfill the principles of AWSNA:
 - c. Protect and use the Waldorf Education service marks only as authorized by AWSNA (in the US and Canada):
 - d. Year planning to initiate grades program:
 - e. Or current grades, including early childhood:
 - f. Equal opportunity and agreement to comply with all relevant nondiscrimination laws and regulations:
 - g. Applicant will distribute the AWSNA Inform newsletter to the school community, including parents, employees, and Board members:

¹AWSNA complies with all federal, state/provincial, and local laws and requires that of all and affiliates members.

AWSNA is committed to a policy of nondiscrimination and equal opportunity without regard to race, color, religious creed, ancestry, age, gender, marital status, national origin, disability or handicap, protected genetic information, veteran status, sexual orientation or any other factor protected by law.

IN SUPPORT OF *Waldorf* EDUCATION

**Application for Affiliation with the
Association of Waldorf Schools of North America**



Applicant hereby gives permission for AWSNA to use, in its social media platforms, website, publications, print materials and other forms of publicity, any public content, photos, and captions from the applicant's social media, website and public areas, as well as any content and materials sent directly to AWSNA. All content may be seen by the general public. AWSNA will not seek further permission nor provide any notification before using such photos.

All statements, commitments, and agreements of applicant made in this application and included in the guide shall apply if applicant becomes an affiliate of AWSNA.

Name:

Date:

After completing this form, please print and sign below. The application can be scanned and sent to mreiser@awsna.org or mailed into the address below.

Signature: _____, Title/Role: _____