



IETA – UK & IRELAND MEMBERSHIP APPLICATION FORM FOR NEW MEMBERS / RENEWALS / UPGRADES

Please complete all sections of the form in **BLACK INK** and in **CAPITALS**:

1. Your Details

Full name: _____

Address: _____

Postcode: _____ Email address: _____

Tel number: _____ Mobile number: _____

2. Which of the Equine Touch Foundation modalities are you studying/a practitioner? (please tick all that apply):	Equine Touch	<input type="checkbox"/>
	VHT	<input type="checkbox"/>
	Canine Touch	<input type="checkbox"/>

3. Please tick which membership type you are applying for/renewing: * * delete as applicable

Practitioner - £50 per annum	<input type="checkbox"/>
Diploma - £30 per annum	<input type="checkbox"/>
Student - £30 per annum	<input type="checkbox"/>
Associate - £20 per annum (For supporters or non-UK based students)	<input type="checkbox"/>
Upgrade to Practitioner - £20 at any point in the year	<input type="checkbox"/>
I no longer wish to be a member of IETA-UK	<input type="checkbox"/>

4. I enclose cheque payment for £ _____ Please tick if you require a receipt

5. *For Practitioner renewals only:*
Please enclose a copy of your current valid insurance certificate plus evidence of OPD undertaken. You need to complete 2 OPD days over each 2 year period. **Enclosed**

6. Date form sent: _____

7. Please return your completed form with a cheque made payable to **IETA-UK & Ireland** to: IETA-UK Memberships, c/o 106 Ballyregan Road, Craigantlet, Holywood, BT18 9RP

New membership runs for 12 months **from month of application.**

Data Protection Act: we will hold your information for sole use in operating IETA-UK & Ireland. No information will be passed to third parties.

Office use only

Mb no.: _____
 Folio no.: _____
 Date paid: _____
 Card issued: _____
 Renewal date: _____

Practitioners only
 Ins. Cert. no.: _____
 Ins. Expiry date: _____
 OPD provided: _____



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Renewal notice sent: _____