

This form is for current EAPH full members to renew annual membership.

Thank you for your continued support and engagement.

Membership Year	1 st March		to 28 th February	
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Title		First Name		Surname	
Clinic Address				Home Address	
Work Phone				Mobile Phone (if different)	
Email				Website	
Method of Payment	Bank Transfer: €125	EAPH: IBAN: IE37 AIBK 9335 6231 6640 08 BIC: AIBKIE2D		Date of Transfer	
	Paypal: €130 (incl admin fee)	Transaction Number		Payment Date	
Insured by				Expiry Date	
Supervision	4 hours annually		Please tick if completed		☐
CPD Hours	24 hours over 12 months		Please tick if completed		☐
How would you like to receive your membership Certificate? (tick a box to choose)				Email	☐ Post ☐
Do you require a membership card with your Cert? (tick a box to choose)				No I don't need it	☐ Yes I'll use it ☐

Declaration:

1. I declare that all the information given including supporting documentation is true and accurate.
2. I have read the EAPH Code of Ethics and Standards, Child Protection policy and undertake to abide by them and operate within them at all times.
3. I confirm that I have never been convicted of a criminal offence and I have never been the subject of disciplinary proceedings by any professional body.
4. I consent to my name and contact details appearing on the EAPH.ie website.
5. **I confirm that I will attend a minimum of one EAPH event during the current year.**
6. I consent to the EAPH contacting me by phone and email. (If **NOT** email membership@eaph.ie)

Name			
Signature		Date	

Please save the completed form to your computer and email it to Membership Officer Linda O'Connell at membership@eaph.ie, or print and post to Ms. Linda O'Connell EAPH Membership Officer, 18 Mill Road, Northampton, UK, NN2 6AX



European Association of Professional Hypnotherapists

FREQUENTLY ASKED QUESTIONS

<i>Where do I send my application for renewal (or new) of full or associate membership?</i>	Your Membership /Application form with enclosures must be posted to the Membership Officer of the EAPH as part of Regulation and Registration. If your name differs from that on your certificates, please provide evidence such as a copy of your marriage/deed poll.
<i>How do I contact the Membership Officer of our Association?</i>	Ms. Linda O'Connell EAPH Membership Officer, 18 Mill Road, Northampton, UK, NN2 6AX. Tel: 0044-7774 070759. Email: membership@eaph.ie
<i>What do I enclose with my application form?</i>	1. Application/Renewal form fully completed and signed (everyone) 3. Copies of Diploma/Advanced Diploma/Degrees (for new members only as copies are already on file for existing members).
<i>What about my privacy under Data Protection?</i>	Your application information together with enclosures will be held in a locked cabinet for the duration of your membership and for 6 years after that as required by Data Protection. Your details are NOT shared with advertising third parties.
<i>What options do I have to pay the Membership fee?</i>	Annual membership paid direct to the Bank Account of: EAPH - IBAN: IE37 AIBK 9335 6231 6640 08 (BIC: AIBKIE2D) PayPal (please add €5 to cover their charge) via https://eaph.ie/membership/ Membership Renewal
<i>How long does it take to process the fee and when will I receive my Certificate?</i>	Your application will be processed within two weeks and your Certificate of Membership will be posted to you.
<i>Who can I have as a Supervisor?</i>	Your Supervisor must be certified as a Supervisor and on the EAPH Register (see website). Otherwise, please enclose a copy of their Supervision Qualifications. We will run 2 online supervision sessions specifically for hypnotherapy during the year.
<i>Do I have to be in Supervision?</i>	Yes. We are adhering to the standards for all mental health professional and need to be in Supervision for support and self-care.
<i>What is our website name?</i>	https://eaph.ie .