



B.E.T.A. Bio Energy Therapists Association

Application Form

Membership type (please tick): New member Renewal member Associate (non-practicing) member

Qualification status (please tick): Qualified Therapist Student

Name of Bio Energy Diploma Training School:

Date Diploma as a qualified Bio Energy Therapist completed:

Date Bio Energy Diploma Training course started (if a student):

Member contact details

Name:

Address:

Tel/Mobile:

Email:

Insurance company details:

Name and address:

Insurance Policy Number

Policy Dates:

Website details for public display

Geographical address:

Ph/Mobile:

Email:

Website:

Profile to be included on website: Yes No

Please forward a photo and profile with your application to info@bio-energy.ie for display on the BETA website

Note: To be an advertised member of BETA you must have current Professional Liability Insurance

Payment details The annual fee is €50.00 and can be paid online through PayPal 

OR Can be paid through IBAN: AIB, Morehampton Road, Donnybrook, Dublin 4, **BIC: AIBKIE2D IBAN IE51AIBK93103926521188**

OR Can be paid by cheque made payable to **BETA Association**.

Forwarding supporting documentation checklist – have you included the following documents:

Copy of Diploma (new member) | Insurance certificate (all members to be advertised on BETA website)

Simply scan the documents and forward them as attachments to info@bio-energy.ie.

Data Protection In line with GDPR obligations, BETA will always keep you informed regarding the types of data we hold on you; the purpose it is used for; and your rights in relation to how it is processed. Please visit our website for full details <http://www.bio-energy.ie/beta%20privacy%20statement.htm>

Complete this form online and use the submit button. Alternatively download, complete and save the form, then forward by Email to info@bio-energy.ie or post to **The Treasurer, Bio Energy Therapists Association, 36 Tolka Valley View, Finglas, Dublin 11.**

I have met the CPD requirements for the year and I have read, understand and accept the Privacy statement of B.E.T.A. I agree to be bound by the rules and code of ethics of the Bio Energy Therapists Association and I certify that the above information is true.

Yes No

Member signature:

Date:

SUBMIT FORM (email to info@bio-energy.ie)