## **Practitioner Upgrade Application**

We are delighted that you are ready to become a Practitioner Member. Please complete this short application and send it back to us with your latest workshop certificate.

Please do not send any money now. We will reduce the invoice to account for fees already paid.

Current Membership Category Please tick the category of membership that you currently hold:						
[ ] Associate Member [ ] Apprentice Practitioner Member						
Section 1: Personal details (all applicants) Please complete in BLOCK CAPITALS:						
Title First name Last name						
Address						
Telephone	1 <sup>st</sup> language					
E-mail	2 <sup>nd</sup> language					
Website	3 <sup>rd</sup> language					
Section 2: Training (all applicants) Let us know Dates and Teacher's name of the Metamorphic Technique® workshops you have attended. Please also attach copies of your attendance certificate(s) with this form.						
Date and Teacher of latest Full Workshop:						
Are you a member of a Professional Body? Yes/No Which one?						
Do you have practitioner insurance? Yes/No What Insurer?						
Section 3: Practical experience Please give outline details of your practical experience; both giving and receiving sessions:						
	In the last 12 months	In total				
Approximately how many one-hour sessions have you given:						
Approximately how many people have you given sessions to:						
Approximately how many sessions have you received:						

		Sig	gnature				
I confirm that I have read and accept the conditions of membership (as set out in the Membership Information sheet) and agree to abide by all Policies, including the Code of Practice and Professionalism & Ethics.							
I agree to participate in the Continued Education Events Programme and accrue the required points for professional renewal each year.							
Signature :				Date	• • • • • •		
	Payment Payment						
An invoice for payment of Membership fee will be sent to you upon acceptance of your application.  PLEASE DO NOT SEND ANY MONEY NOW							
Annual membership fee							
Associate	Apprentice Practitioner	Practitioner £60	Practitioner Teacher	Apprentice Teacher	Teacher		
PLEASE RETURN YOUR COMPLETED APPLICATION TO OUR OFFICE VIA EMAIL TO office@metamorphicassociation.net							
!! Checklist – have you enclosed:							
	[ ] Latest W	orkshop attend	lance certificates				
For office Application	e use only on accepted by			Date			