

ANP

Association of Naturopathic Practitioners Membership Application

First name: _____	Title: Mrs./Ms/Mr./other: _____
Surname: _____	Date of birth: _____
Address: _____	Telephone: _____
_____	Mobile: _____
_____	Fax: _____
Post code: _____	E-mail: _____
Practice _____	Telephone: _____
Address: _____	Fax: _____
_____	Website: _____
Post code: _____	

I am applying for (please tick appropriate box):

Ordinary Membership*: (see below)

Honorary Membership: £ 0

Ordinary Membership rates (1 year's membership from 1 January–31 December; fees are pro-rata as shown below, dependent on joining date)

Joining date	January–April	May–August	September–December
Fee to 31 December	£130 <input type="checkbox"/>	£85 <input type="checkbox"/>	£45 <input type="checkbox"/>

Naturopathic Student
Membership: £ 30.00

Friends of the ANP:
I wish to donate £.....
to promote the interests of the ANP

Please send me ____ ANP promotional leaflets (100 cost £10.00) I enclose a cheque for £_____

Please list the school or college where you qualified (or are training) and discipline(s):

College _____ Date qualified _____ Discipline _____

Membership of other professional bodies: _____

Therapies/diagnosis you practise (Maximum 5): _____

I wish to take part in the ANP Client Referral Scheme: YES: NO:

I wish to take advantage of the ANP's insurance scheme: Ordinary: Student:

Applicants preferring to use another insurance party must provide a copy of the valid and current insurance certificate. It is a requirement of Ordinary membership that you carry adequate Professional Indemnity Insurance.

I confirm that the above information is true and correct and authorise the ANP to make the necessary reference checks in connection with this application. I have read and understood the ANP Code of Conduct and Etiquette and agree to abide by the code.

Signature: _____ Date: _____

*MANP - ordinary member applicants please provide in support of the application: CV, copy of certificates, insurance, 2x professional references, and cheque.

Registered in England and Wales, no. 04272170

Coombe Hurst, Coombe Hill Road, East Grinstead, West Sussex, RH19 4LZ

Tel : 01342 303 269 email : info@naturopathy-anp.com www.naturopathy-anp.com