

Application Form to become an Organisational Member of EABP for Body-Psychotherapy Organisations

Name of Organisation
Address of Organisation
Name of contact person:
Tel No: Fax No: e-mail:

Have you read carefully the criteria for Organisational and Institutional Members ? Yes No
The following question numbers refer to these criteria.

1.(i)
We recognise the EABP definition of Body-Psychotherapy. Yes No

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We recognise the EABP definition of the work of a Body-Psychotherapist. Yes No

1.(ii)
We basically support the aims and objectives of EABP. Yes No

1.(iii)
We actively work in Body-Psychotherapy according to the following method:
.....

Now please complete either Section A, B or C

As a Training Organisation (A):

- **2.** We have been in existence for years and have trained approximately people
- We have a legal organisational or corporate structure which is
.....
- We have an appropriate code of ethics and complaints procedure Yes No
- There are currently people involved in the Organisation (trainers, supervisors, admin etc.) and trainees
- **5.** We attach a list of individuals within the Organisation, indicating their status: trainer, therapist, trainee, etc. Yes No
- **6.** At least one person is an individual member of EABP Yes No
- We understand that we can be/may already be Organisational Members of an EABP National Association in a particular country and that there is no further fee involved. Yes No

As a Professional Association (B):

As a professional association of Body-Psychotherapists working in

- **3.** We are number of practitioners who fulfil the membership conditions of EABP or similar.
- **5.** We attach a list of our individual members. Yes No
- **6.** At least one person is an individual member of EABP Yes No

As a European-Wide Institution (C):

- **4.** As an Institutional Member, we have approximately number of members in countries, specifically these countries:.....
- and we acknowledge that our Membership Criteria and Professional Standards are compatible with EABP. Yes No
- that individual members could become Members of EABP if they so wish. Yes No
- **5.** We attach a list of our individual members. Yes No
- **6.** At least one person is an individual member of EABP Yes No

- We would like you to send:
 - copies of EABP Training Standards; and
 - EABP Information Booklets;
 - EABP Register of European Body-Psychotherapists;
 -Membership Information Booklets; and
 -Newsletters.

**Please send to EABP Secretariat,
Jill van der Aa, Leidsestraat 106-108/2,
1017 PG Amsterdam, The Netherlands.**

Tel: 0031-20-330-2703

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e-mail: eabpsecretariat@planet.nl