Bowen Association Australia

Incorporated in Victoria on 7January 1998 A0035959J

Application for Full, Accredited, International or Animal Membership

You are invited to apply to join the Association by completing the following form and attaching the necessary documents which are listed overleaf. Please provide the appropriate documentation according to your qualification.

Surname:		Given Names:	
Postal Address:			
Suburb:	State:	PCode:	Country:
DOB:	Email:		
Landline:		Mobile:	
1 Clinic Street Address:			
Suburb:	State:	PCode:	Country:
Business Phone:			
2 Clinic Street Address:			
Suburb:	State:	PCode:	Country:
Business Phone:			
Please note: Only the Business Phone/s nominated and the actual Suburb of your Clinic/s will be listed on the BAA website			

I hereby apply for membership of The Bowen Association of Australia Inc as :-

a	☐	A Full Member (Cert IV in Bowen Therapy)	$240.00
b	☐	A Full Member - Animal Bowtech (Professional Practitioner Award)	$240.00
c	☐	An Accredited Member (Diploma of Specialised Bowen Therapy)	$240.00
d	☐	An International Member (International Certificate of Bowen Therapy) *	$240.00
e	☐	An Animal Member (Cert of Animal BowenCare)	$240.00
f	☐	Dual Membership ☐ **a** plus **b** or **e** ☐ **c** plus **b** or **e**	$255.00

In the event of my admission as a Full, Accredited, International or Animal Member I pledge to uphold the Rules of Incorporation, Code of Ethics and Code of Conduct.

Enclosed is an amount of $ .00 being the Membership fee for one year from date of admission. This fee includes a $10.00 donation to the Tom Bowen Legacy Trust Fund which you can choose to Opt Out.
Please see overleaf for payment options.

Signed: _____ Dated: _____

Please post or email application along with documents and remittance to the Secretary:

Bowen Association Australia PO Box 2024 Rangeview Vic 3132

Please complete and attach all relevant documentation appropriate for the level of membership for which this application is being made.

Full Member	☐	**a**	A copy of your Certificate IV in Bowen Therapy
Full Member - Animal Bowtech	☐	**b**	A copy of your Professional Practitioner Award
Accredited Member	☐	**c**	A copy of your Diploma of Specialised Bowen Therapy
International Member	☐	**d**	A copy of your International Certificate of Bowen Therapy *
Animal Member	☐	**e**	A copy of your Animal BowenCare Certificate
Dual Membership	☐	**f**	☐ **a** plus **b** or **e** ☐ **c** plus **b** or **e**

Plus

☐	A copy of your current Provide First Aid Certificate - HLTAID011 for Full, Accredited and Animal Member. For International Member, the minimum First Aid Certificate required by law in the country of practice.
☐	A copy of your Professional Indemnity Insurance - if not currently insured it is a requirement that a copy of PI Certificate be forwarded to the Association within 30 days of receiving notification of acceptance of membership. The minimum Professional Indemnity Insurance requirement is $2 Million per claim (or occurrence)
☐	If the period since attaining the qualification is greater than 12 months please attach evidence of any relevant continuing education.
	* International Certificate of Bowen Therapy as issued by Bowen Training Australia

The Association is required to hold current copies of the above forms

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METHOD OF PAYMENT	
Name:	
Visa ☐ Mastercard ☐ American Express ☐ Money Order ☐ Cheque ☐	
Total Amount $	Opt Out Donation ☐
Credit Card No: ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ Exp Date: ☐☐☐☐	
Cardholder's Name (as it appears on the card):	
AUTHORISATION	
I authorise the Bowen Association of Australia to debit my credit card with the amount shown above.	
Cardholder's Signature:	Date: