

## IRISH PLAY THERAPY ASSOCIATION

### Full Membership Renewal Form

#### **Renewal for Full Membership**

This category is open to any person who has held full membership with IPTA, where the information provided on a full application form is on file and still relevant and accurate. All full members must:

- hold a Play Therapy qualification accredited by BAPT
- have regular supervision.
- be in or has recently had personal therapy
- have up-to-date clear police vetting.

Full Membership fee is due on application.  
This category is not open to Student Members.

CATEGORY OF MEMBERSHIP

## Application for Renewal of Full Membership Irish Play Therapy Association

### 1. PERSONAL DETAILS

Your Full Name:

Gender:

Female

Male

Address:

Telephone No(s):

Fax No

Email Address

Date of Birth

# IRISH·PLAY THERAPY·ASSOCIATION

## 2. PLAY THERAPY QUALIFICATION:

## 3. DO YOU OFFER SUPERVISION?

YES

NO

## 4. DETAILS OF SUPERVISOR TRAINING

## 5. . OTHER RECENT RELEVANT TRAINING - OPTIONAL

Course Title	Award (Cert. Dip.etc. )	Dates		Training Institution	No of Taught Hours
		From	To		

## 6. CURRENT WORK

Date Started	Job Title	Employer	Main Responsibilities

## 7. NEW AREAS OF PLAY THERAPY EXPERIENCE / SKILLS - optional.

## 8. DECLARATION FOR FULL MEMBERSHIP APPLICANT.

I CONFIRM THAT:

- a) I do not have a criminal record that may prejudice the interests of children.
- b) I have not been dismissed from employment on the grounds of professional misconduct.
- c) I have not been refused membership of a professional body or register in a related field on the grounds of professional misconduct.
- d) I have read and will abide by the criteria defined in the Code of Ethics Practice, and the Child Protection Policy of Irish Play Therapy Association.
- e) The information detailed in this membership application form is true to the best of my knowledge and does not contain any false or misleading information regarding my experience, qualifications, practice, membership or identity.

YOUR SIGNATURE:

YOUR FULL NAME:

DATE:

## 9. Annual fee for Membership

Annual full membership fee is €100. Renewal fees are due annually in January.

## 10. RENEWAL MEMBERSHIP APPLICATION CHECKLIST

- I have enclosed my Full Membership Fee of €100.
- I understand that my Full Membership application will be considered by the IRISH PLAY THERAPY ASSOCIATION membership committee.
- I have enclosed valid copy of professional indemnity insurance certificate.
- I have enclosed evidence of appropriate Qualification.
- I have enclosed copy of recent police vetting.
  
- I accept that the IRISH PLAY THERAPY ASSOCIATION membership committee reserve the right to refuse membership and that the decision of the committee is final.
- I have signed and dated the Full Membership Declaration form

Please make cheques payable to **'Irish Play Therapy Association'** and return with your completed Application Form and documentation to:

**Mary Barry**  
**IPTA Membership Secretary**  
**77 Cluain Cairn,**  
**Carrigtohill,**  
**Co. Cork.**