

LAST UPDATED 29 September 2011

## APPLICATION FORM FOR FULL (NON-PRACTISING) FROM STUDENT MEMBERSHIP 2011-2012

### Personal Details (*This information is not for publication*)

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_ Male / Female

Address: \_\_\_\_\_

Post Code: \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

e-mail: \_\_\_\_\_ Web: \_\_\_\_\_

**To the Governing Council:** I hereby apply to become a Full Member (Non-Practising), and Guarantor for the sum of £1, of the British Association for Applied Nutrition and Nutritional Therapy ("the Company") and acknowledge that I will be a Member of the Company upon the terms of and subject to the Memorandum, Articles of Association and Members' Agreement of the Company. I understand that Membership is subject to an **annual fee of £75**, and I accept that this fee covers the period 1st October to 30th September of every year (or part thereof should I join during the year).

### In support of my application

- I enclose a copy of my degree/diploma certifying that I have completed a training course in nutritional therapy at a training college recognised by BANT.
- I understand that the Governing Council of the Company has the right to reject my application. The Governing Council, at its discretion, may request from me, or appropriate others, further information in support of my application. Please read the full Terms and Conditions of Membership located on our website at the following link:  
[www.bant.org.uk/bant/pdf/memberForms/TERMS\\_CONDITIONS\\_MEMBERSHIP.pdf](http://www.bant.org.uk/bant/pdf/memberForms/TERMS_CONDITIONS_MEMBERSHIP.pdf)
- I agree to abide by the **Code of Professional Practice Handbook – Issue 1.1 March 2011**. On acceptance of my membership application, I understand that I will receive my personal copy of the Code and I agree to familiarise myself with the content within a short time of receipt. I also agree to review the content on an ongoing basis, as I understand that aspects of the Code will be updated as and when necessary and posted on [www.bant.org.uk/bant/jsp/member/professionalPractice.faces](http://www.bant.org.uk/bant/jsp/member/professionalPractice.faces)

### Mailings

- Tick here if you **do not** wish to receive emails and e-Newsletters from BANT (these contain important information)
- Tick here if you **do not** wish to receive occasional special offers or promotions from selected third parties about nutritional therapy products and services

### BANT Membership Fees

Joining Between the Following Dates	Membership Fee	Total Due	Tick Choice
1 Oct 2011 – 31 Mar 2012	£75.00	<b>£75.00</b>	<input type="checkbox"/>
1 Apr 2012 – 30 Sep 2012	£37.50	<b>£37.50</b>	<input type="checkbox"/>

### Payment Options (*Please note that membership fee payments are non-refundable*)

- BACS - email [theadministrator@bant.org.uk](mailto:theadministrator@bant.org.uk) for bank account details
- Paypal - email [theadministrator@bant.org.uk](mailto:theadministrator@bant.org.uk) for a Paypal invoice to be issued

Please return this application form, signed and dated, to: **British Association for Applied Nutrition and Nutritional Therapy (BANT), 27 Old Gloucester Street, London WC1N 3XX**