

DECLARATION OF A SUPPORTING MEMBER

Relational Trauma Therapists Association

I, the undersigned:

Full name:

Residential address:

Phone number:

E-mail address:

Hereby declare that:

1. I declare my intention to join the Relational Trauma Therapists Association as a supporting member.
2. I accept the Association's Statute and undertake to comply with it, as well as to support the Association's activities in accordance with its goals.
3. I have completed the following training(s) in the field of psychotherapy, trauma therapy and/or psychotraumatology:
.....
.....
.....
4. I undertake to regularly pay the membership fee.
5. I consent to the processing of my personal data by the Association for membership purposes in accordance with applicable data protection laws.

Date:

Signature:

Decision of the Association's Board:

☒ Accepted / ☐ Rejected

Date of decision:

Signature(s) of Board Member(s)