



Application for Full, Associate, or Student Membership

I wish to apply for membership of the Institute of Health Promotion and Education, a charitable company limited by guarantee and agree to abide by the regulations as set out in the Articles of Association. I agree to pay the Company an amount not exceeding £1 if the Company is wound up during my membership or within twelve months of my resignation. I undertake to pay the appropriate subscription on the 1st January each year and wish to receive notices under the Articles of Association and all documents to which I am entitled as a member, electronically*. In the event of my resignation I undertake to notify the Administrative Secretary in writing. (*Other methods available by request.)

PERSONAL DETAILS:

Title: _____ Surname: _____ Forenames: _____
Address: _____
Postcode: _____
Email: _____ Telephone: _____
 Please tick this box to receive our regular newsletter via email (you can unsubscribe at any time)

ELIGIBILITY:

Degrees/Membership of Professional Bodies: _____

ENGAGEMENT:

I am presently engaged in **HEALTH PROMOTION/HEALTH EDUCATION** in a **full / part-time** capacity (select):
Present appointment _____ Date appointed: _____
Previous appointments:
A) _____ Date appointed: _____
B) _____ Date appointed: _____

PROFESSIONAL REFERENCE for Member grade applications (name and contact details):

Name of Referee: _____ Contact Details: _____

SPECIAL HEALTH EDUCATION INTERESTS:

I wish to apply for full/associate/student membership (delete as appropriate)
I enclose the annual membership subscription: total £ _____
I enclose copies of my qualifications and professional memberships.
Please make cheque payable to 'Institute of Health Promotion and Education Ltd'

Signed: _____ Date: _____

Please complete and sign this form, then post to: **Dawn Wills, IHPE, c/o 20 Mardley Avenue, Welwyn, AL6 0UD**
For details of eligibility visit www.ihpe.org.uk or contact the Honorary Secretary: honsec@ihpe.org.uk.

ANNUAL MEMBERSHIP SUBSCRIPTION (2018)

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|-----------------|--------|-------------------|--------|
| MEMBERS | £36.00 | ASSOCIATE MEMBERS | £31.50 |
| STUDENT MEMBERS | £25.00 | RETIRED MEMBERS | £13.50 |

IHPE USE: DATE OF JOINING: _____ MEMBERSHIP NUMBER: _____

By becoming a member of the IHPE you acknowledge that you have read and understood the processes and policies referred to in the IHPE's Privacy Notice, (available on our website: ihpe.org.uk) and consent to our data collection, use, sharing and processing practices as set forth within the Privacy Notice.

Registered Charity Number: 1156738, Charitable Company Number: 08476077
Registered Address: MBL House 16 Edward Court,
Altrincham Business Park Off George Richards Way, Altrincham, WA14 5GL