

### **EUROPEAN ASSOCIATION FOR INTEGRATIVE PSYCHOTHERAPY**

## European Certificate of Integrative Psychotherapy Application Form

Section 1 (to be completed by the individual applicant)

In order to be awarded the European Certificate of Integrative Psychotherapy (hereafter ECIP) and regicontact details on the EAIP website you must sign the following statement:	ster your
I, (print name in	capital letters)
agree to the EAIP Registrar holding the information that I provide below on their computer database. that the information I give below is correct and accurate.	I also declare
Signed Date	
Now please print in capital letters the contact information below	
Name	
Address (please indicate the address you wish to have listed on the EAIP website)	
Telephone	
Email address	
Website (if applicable)	
Please note, and ☑ the category for which you wish to register:	
<ul> <li>if registering as an Integrative Psychotherapist the initial fee is 75 euro</li> <li>if registering as an Integrative Psychotherapist and Supervisor the fee is 85 euro</li> <li>If registering as an Integrative Psychotherapist, Supervisor and Trainer the fee is 95 euro</li> </ul>	
Section 2 (to be completed by the sponsoring EAIP Member Organisation)	
The person completing this section must be authorised to do so by the Member Organisation (MO) and we be the senior trainer or Director of the MO.	vill normally
Person being sponsored for ECIP (print name in	capital letters)
I confirm that the above named person is, by the rules of my Member Organisation, suitable for • the award of ECIP • entry on the website as a Supervisor approved by the sponsoring Member Organisation • entry onto the website as a Trainer approved by the sponsoring Member Organisation	
Please ☑ as appropriate	
Signature:	
Name (please print)	
Position in Member Organisation (please print)	
Name of Member Organisation (please print)	



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# European Certificate of Integrative Psychotherapy Application Form

#### Please note

A copy of this form must be completed for each individual applicant.

The application form should be sent electronically, with confirmation of a bank transfer of 75 euro, 85 euro or 95 euro (see above) to Andra Rampu, administrative secretary of the EAIP, email <a href="mailto:andra@euroaip.eu">andra@euroaip.eu</a>. Payment may be made by PayPal to eaipdublin@gmail.com. Fees may be transferred electronically as follows:

Name of Bank account Bank address IBAN BIC European Association for Integrative Psychotherapy Permanent TSB, Old Butterfield Avenue, Rathfarnham, Dublin 14 IE91 IPBS 9906 4272 2425 44 IPBSIE2D

A certificate cannot be issued without completed and signed application forms and until payment is received by Treasurer.

When awarded the ECIP the certificate holder will be registered with EAIP as an Integrative Psychotherapist. Registration is renewable annually at a fee of 50 euro (Integrative Psychotherapist), 60 euro (Integrative Psychotherapist and Supervisor), 75 euro (Integrative Psychotherapist, Supervisor and Trainer). You will automatically be informed when your registration is due for renewal. If you do not wish to renew your registration, your details will be removed from the EAIP register and website.