Professional Clinical Hypnotherapists of Australia Inc.



Inc. No 9876613 ABN 41667141816

Annual Subscription Notice

1 July, 2016-30 June, 2017

Annual subscriptions are due by the 30th June 2016. Please ensure **ALL** matters relating to PCHA membership are completed prior to 1 July 2016.

	Please click on grey area to type in your responses
Name:	
Preferred Title and First name	
Address Residential	
Address Postal	
Address Practice	
Email Address	
Web site	
Phone Number Private	
Phone Number Business	
Phone Number Mobile	
Business Name	
Insurer and renewal date	
РСНА	
First Aid trainer name, cert No or ID	
and renewal date	
Working With Children Cert No.	
and renewal date and/or National	
Police Check*	
Details on PCHA Website? Yes	
No	
Specialities	
Areas of Interest	

^{*}At Least one of these is required for membership of PCHA

Payment Details. Whichever payment method you choose, please forward an email to the membership Secretary with details.

Bank Transfer:

St George Bank BSB 112 879 PCHA Account No. 054322540

Account Name: PCHA Inc.
Payment Description Annual

Membership

Payer Name (Your Personal name)

Enter amount \$ 140

Membership Secretary

Ronald Cox

20 Panorama Drive TATHRA, NSW 2550 Phone: 02 6494 4766

Mobile: 0427 486 988

Email: memsecpcha@yahoo.com.au

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Statutory Declaration

I, [Full Name of Declarant] of [Street Address of Declarant] in the State of	, [Occupation of
Declarant] do solemnly and sincerely declare that:	

- 1. I am a holder of a current first Aid Certificate.
- 2. I will maintain current insurances as required by the PCHA,
- 3. I have maintained a minimum of 20 hours Ongoing Professional Development each year,
- 4. I display the NSW Health Code of Conduct visible to my clients,
- 5. I display and work within the PCHA Code of Conduct,
- 6. I am involved in hypnosis/hypnotherapy for not less than 10 hours per month as an average,
- 7. I am a holder of the Working with Children and/or National Police Check certificate for selfemployed people

And I make this solemn declaration conscientious the provisions of the <i>Oaths Act 1900</i> .	ly believing the same to be true, and by virtue of
	[Signature of person making the declaration]
Declared at[Place] ¹ on [Day] of [Month] 20[Year]	

Important: Both pages MUST be returned to the PCHA Membership Secretary for your membership renewal to be processed