

Please provide a separate payment for your insurance

Special Winter offer 2021-2022!

Member no:	Name:					
		Amount	Date	Cheque no	Sort code	CC
	Membership fee	£250				
	Staged payments	£50 x 5				
	Total paid	£				
	Plus insurance	£44/£36.93				

### Your details - please complete both pages of this form, then sign section 4

1/ Full name: .....

Date of birth: ..... Nationality: .....

Address: .....

Town: ..... County: ..... Postcode: .....

Tel no: ..... E-mail: .....

### Your homeopathic training

2/ Colleges attended and qualifications gained (please include full name of college, contact details and dates of when attended)

.....

.....

.....

### Referee

3/ Please give the name, email and address of a professional person (not related to you) whom you have known for at least three years, and who can provide a personal reference:

.....

Are you a member of other professional organisations (please provide details).....

.....

This special offer is available from 01 December 2021 until 31 January 2022, and provides you with registered membership until 30 September 2022. The ARH membership year ends on 30 September, after which membership renewals will be due.

**The normal registration fee of £75 is waived for this special offer!**

The total payable for Registered membership is £250. Please complete your card instruction on page 3 of this form, or if you prefer to pay by cheque, please make your cheque payable to 'ARH'. Please note, you can stage the payments by providing us with your card instruction to take five one-monthly payments of £50 each.

If you would prefer to set up a Direct Debit facility to make your staged payments, please fill in your bank details on page 3 of this form.

Please make a separate insurance payment of £44 for cover to commence in December, or £36.93 for cover to commence in January 2022. Insurance cheques need to be made payable to 'Balens Ltd', or you can complete your card payment details on page 3 of Balens insurance form.

**The Alliance of Registered Homeopaths**

Millbrook, Millbrook Hill, Nutley, East Sussex, TN22 3PJ

Tel: 01825 714506 Web: [www.a-r-h.org](http://www.a-r-h.org)

Email: [info@a-r-h.org](mailto:info@a-r-h.org)

Please make cheques for your registered membership fee payable to 'ARH', or complete the appropriate section on page 3 of this form when providing a card or Direct Debit instruction. Please be sure to include a **separate** payment for your insurance, cheques payable to 'Balens Ltd', or credit/debit card instruction completed on payment sheet included with insurance form. If you have your own insurance, please be sure to **include a copy of your current insurance certificate** together with your registration application

Please check you have completed, signed and enclosed **all** the relevant forms and that you have included:

- **your insurance form and insurance payment (or a copy of current insurance certificate when insured outside of ARH block scheme)**
- **a copy of your graduation certificate or BHMS/DHMS homeopathy qualification**

Then **sign** the statement below

4/ I am aware of no claims, suits or other circumstances which could reasonably lead to a claim being made, or action initiated against me in relation to my homeopathic practice. I confirm I have read the ARH Code of Ethics (*available from ARH website: [www.a-r-h.org](http://www.a-r-h.org), or from office upon request*). If accepted as a Registered Member of ARH, I agree to practise in accordance with the ARH Code of Ethics. I also agree to undertake regular CPD in order to maintain and further develop my professional skills. I certify the above details to be true and correct

Your signature: ..... Date: .....

Information to be placed on the ARH and Find a Homeopath websites

First name	
Last name	
Address line 1	
Address line 2	
Address line 3	
Town/City	
County	Postcode:
Country	
Telephone	
Mobile	
Email	
Website	

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## Your payment instruction when paying via Direct Debit or credit/debit card

### Direct Debit instruction for ARH registered members

Please complete this (upper) part of the form if you would like to stage the payments of your ARH membership fee via **Direct Debit** instruction. **Please use the lower half of this form for card payments**, either single or staged payments.

Normally, staged payments will comprise one-monthly payments of an equal amount as shown on table below. However, if a transaction fails for some reason, the amount taken may vary, to ensure your payments are completed by the end of the ARH membership year (30 September).

**Please note we can only set up DD transactions for members with a UK bank account.**




# ARH

Please fill in the whole form including official use box using a ball point pen and send it to:

**Alliance of Registered Homeopaths (ARH)**  
**Millbrook**  
**Millbrook Hill**  
**Nutley**  
**East Sussex**  
**TN22 3PJ**

Name(s) of account holder(s)


Bank/building society account number

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Branch sort code

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Name and full postal address of your bank or building society

<small>To: The Manager</small>	<small>Bank/building society</small>
<small>Address</small>	
<small>Postcode</small>	

Reference

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### Instruction to your bank or building society to pay by Direct Debit

Service user number

2	5	3	1	8	4
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FOR ARH OFFICIAL USE ONLY

This is not part of the instruction to your bank or building society.

**Instruction to your bank or building society**

Please pay ARH Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with ARH and, if so, details will be passed electronically to my bank/building society.

<small>Signature(s)</small>
<small>Date</small>

DD11

*Please note, the ARH is compliant with the Payment Card Industry Data Security Standard (PCI DSS).*

### Your card details:

Credit/debit card no:

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Amount: £ ..... Expiry date: ..... Security code: .....

Your signature: ..... Date: .....