

Member Organization Application

Please type or print neatly

Name _____ Date of Application _____
Address _____ Director _____
_____ Email _____
Phone _____ Website _____
Fax _____

Please complete this application form and send all of the following

_____ \$250 application fee for organizations seeking membership with ISMETA

Payment Enclosed

I have already paid online

_____ \$250 Yearly Registration Fee

_____ \$10 for Certificate of Registry (optional; 8 1/2 x 11" formal Certificate of Registry, with Seal)

_____ Statement of Purpose (include if your school has already composed this statement) Describe the mission and goals of your program

_____ An Itemized breakdown of your hours relative to the items listed under "Curricular Requirements" in the Guidelines for ISMETA Approved Training Programs.

_____ Your questions (Please type on an attached sheet any questions or concerns your school may have about the guidelines. Please include the section number and letter of the particular clause to which you are referring)

_____ Copies of your promotional materials

Enclose applicable catalogues, brochures and video tapes (VHS, U.S. or European format) or DVD of your school and/or program

_____ Signed and endorsed copy of the ISMETA Code of Ethics