



Section 1 - Personal Details (*Please use BLOCK CAPITALS)

Name: _____
 Address: _____
 E-Mail: _____
 Membership Number: _____

Sex: M F
 Telephone : (w) _____ (h) _____
 Mobile : _____
 Date of Birth (d/m/y) : _____
 Employment Occupation: _____

Which type of Membership do you require? Please tick: Professional Associate Student Friend (*see page 2 for details on each)

Section 2 - Reiki Training (*Only details and copy certificates of training undertaken since last renewal with RFI required)

Level	Date Attuned	Reiki Teacher / Masters Name	Duration of Training	Type of Reiki

Section 3 - Skills

What other complementary therapies do you practice, if any?

Do you have any additional skills that you could offer to benefit RFI and the membership?

Section 4 - Practitioner Listing (*Please attach a copy of your current insurance)

Insurance / Provider Name	Insurance Expiry Date

Please indicate by ticking the appropriate box if you would like to be listed as

Practitioner Teacher Both Practitioner & Teacher

(Please note that your insurance certificate must specify if you are covered for teaching in order for you to be listed as a Teacher)

Please Specify the information you would like displayed in the following categories:

Name: _____
 Location: Please specify the area(s) you wish to be listed under – A maximum of 2 listings allowed (e.g. Wicklow, Dublin South)

 Contact Details (telephone and / or email and / or website):

How did you hear about RFI? _____

I hereby confirm that I have received; read and understood Reiki Federation Ireland Constitution (2016) including its appendix, Code of Ethics, Code of Practice, Complaints Procedure Format and Teaching Guidelines and by my signature agree to abide by them. I further declare that I have no criminal record that might prejudice the interest of clients and I have not been refused membership of any professional body or register in a related field on the grounds of professional misconduct and have no such complaints pending. Disclosure of any relevant pending criminal, investigatory proceedings or enquiries should be made on a separate sheet attached to this application.

Signed: _____ Date: ____/____/____

Please note: We do not pass on your information to any third party for marketing purposes.

Please Forward To:

Membership Secretary
 Reiki Federation Ireland,
 P. O. Box 11625,
 Dublin 6W

Phone: 087 9819366

- Checklist For Enclosures:**
- Postal Order
 Cheque No. _____ (make payable to Reiki Federation Ireland with appropriate fee)
 Pay by PayPal – please contact us for an invoice (see page 2 for more information)
 - Copy of Reiki Certificates (only of training undertaken since last renewal with RFI required)
 - Copy of Insurance and First Aid cert (Practitioners only)
 - Copy of CPD Log Card if required (Practitioners only)

OFFICE USE ONLY

DATE RECEIVED: _____
 RECEIPT NO. _____
 AMOUNT RECEIVED: € _____
 EXPIRY DATE _____
 MEMB NO: _____
 BANK REF: _____

DATABASE:

Criteria for Membership:

1. Application for membership of RFI shall be open to any person who is initiated into Reiki, in the presence of a Reiki Master (*Friend of Reiki Category excepted)
2. Members shall agree to abide by the Constitution of RFI including its appendices by signing the declaration below. All applications for membership shall be submitted to the Committee for its approval.
3. Copies only of Reiki certificates of training undertaken since last renewal with RFI to be sent with completed membership form .
4. Membership fee to be enclosed with completed application form (see below for fee structure)
5. Copy of current insurance certificate and First Aid cert when available (necessary for inclusion on the Practitioner Listing).
6. Membership renewals (see structure below regarding renewals)
7. Those who have completed Reiki Level 1, 2 or 3, or those who have completed Reiki Practitioner Level but do not wish to practice Reiki Professionally
8. Copy of CPD Log card if required (necessary for inclusion on the Practitioner Listing).

All members of RFI have the benefit of belonging to a professional body that represents all lineages of Reiki and has a Code of Ethics and a Code of Practice by which all members who are initiated into Reiki will abide. All members also have access to further education in relation to current developments in Reiki, and access to the RFI benefits.

Membership Categories:

Category Name	Requirements	Specific Benefits	Fee
Professional Member	Copy of Reiki Cert(s) (only of training undertaken since last renewal with RFI required) Copy of Current Malpractice Insurance Copy of CPD Log Card if required Copy of Current Basic First Aid cert	Professional Membership Certificate and Card Eligible to use “Member of RFI” on letterhead, business cards and on their website Inclusion on Practitioner/Teacher listing Receive Practitioner Pack Opportunity to avail of discounted Malpractice Insurance Eligible to attend and vote at AGM and EGM Eligible to serve on RFI Committee Eligible to attend RFI events and workshops Receive RFI Newsletter Access to Networking and Reiki Shares Opportunities for Promotion through RFI media/events Eligible to advertise Reiki shares on RFI website Invitation to RFI Annual Social Gathering	€75
Associate Member	Copy of Reiki Cert(s) (see 7 above)	Associate Membership Certificate and Card Eligible to attend and vote at AGM and EGM Eligible to serve on RFI Committee Eligible to attend RFI events and workshops Receive RFI Newsletter Access to Networking and Reiki Shares Invitation to RFI Annual Social Gathering	€50
Student Member <i>*Please note you can only remain a Student Member of RFI for 1 Year.</i>	Copy of Reiki 1 Cert(s)	Student Membership Certificate and Card Eligible to attend but not vote at AGM and EGM Eligible to attend RFI events and workshops Receive RFI Newsletter Access to Networking and Reiki Shares Invitation to RFI Annual Social Gathering	€25
Friend	None	Friend of Reiki Certificate and Card Eligible to attend certain RFI events and workshops Receive RFI Newsletter Invitation to the RFI Annual Social Gathering	€20

Membership Renewals will be due on March 31st each year. Please find below pro-rata table:

If you join during..	you pay	Professional	Associate	Student	Friend
Mar-May	1 Year's fee	€75	€50	€25	€20
June - Aug	¾ Year's fee	€55	€36	€18	€15
Sept - Nov	½ Year's fee	€37	€24	€12	€10
Dec - Feb	1+ ¼ Year's fee	€93	€62	€31	€25