



THERAPIST'S APPLICATION FORM

Please complete giving as much information as you can to assist the Harmony Therapy Trust Admin staff in processing your application. Please make sure you read the Therapist Guidelines also available on our website that the Trust requires you to follow when providing treatments.

DATA PROTECTION NOTICE. Should you be accepted and agree to become one of THTT's registered therapists, in order to process invoices and other vital data, we will need to keep all information provided on this form in encrypted format on our therapists database as well as copies of your certificates. You will be required to sign a declaration of Agreement and terms of engagement form upon registration. Full details of our Data Protection Policy will be available on our website shortly.

Name Address & Postcode
QUALIFICATIONS (Please attach copies)
ENHANCED DBS CHECK – CERTIFICATE NUMBER (Please attach copies)
Therapies offered
Areas covered
Insurance (please attach copy)
Contact Numbers / Email

When completed please send form together with copies of your certificates, insurance and association details together with two passport sized photographs either by post to Administration Office, The Harmony Therapy Trust, Harty Room, The Healthy Living Centre, Royal Road, Sheerness Kent ME12 1HH or scan them and send by email to thtt2010@gmail.com . If you do post, please make sure you put the correct postage for the size of envelope.

You will then be contacted by Julie Murby to arrange an informal meeting with the trustees. If we are mutually in agreement to your joining the Team, you will remain self employed and payment will be made upon production of invoice details of which will be explained to you at the meeting. Please make sure you have read our Data Protection Notice above.