

E F T A

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**Chamber of Individual Members**

*secretariat:* rue de la Voie Cuivrée, 26 – 5503 Sorinnes - Belgium

tel. 00 32 496 22 22 96 \* e-mail: [eftacim@gmail.com](mailto:eftacim@gmail.com)

Website: [www.europeanfamilytherapy.eu](http://www.europeanfamilytherapy.eu)

Dear Madam, Sir,

Thank you for your interest in becoming an individual member of the EUROPEAN FAMILY THERAPY ASSOCIATION.

As you may know, EFTA is the first and only organization to bring together family therapists from all over Europe, with members from 29 countries.

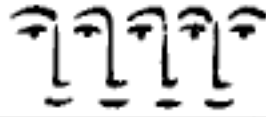
The aim of this association is to promote a higher level of competence and quality in the practice, research and teaching of family therapy as well as to link and coordinate European centers, institutes and individuals in the field of family therapy.

Since 2001 EFTA has turned over a new leaf. The current structure consists of 3 chambers (Chamber of Individual Members, Chamber of Training Institutes and Chamber of National Associations).

If you would like to become a member of EFTA, please fill out the enclosed form and return it with the required documents (see checklist on the form).

We are looking forward to hearing from you.

Juan Antonio Abeijon  
Chair of the EFTA Chamber of  
Individual Members



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**APPLICATION FOR EFTA MEMBERSHIP**

I wish to apply to become an EFTA effective member and enclose the following documents with this application :

1. A curriculum vitae.
2. A paper certifying a long training in Systemic Approach and Systemic Family Therapy delivered by one training institute (or maximum 2 different institutes). It will attest of a **minimum of 700 hours of training in a period of at least 4 years, including at least 450 hours of clinical training under - direct and indirect - supervision by the trainer, and at least 250 hours of personal and autonomous clinical practice with couples and families, certified by the training institute.**

NOTE :

Individual or group supervisions that are not included in the training programme can not be validated as « training ».

The university programmes whose heading contains the systemic reference and/or the reference to the family therapy are not regarded as « training in systemic family psychotherapy ».

3. A recommendation from a person other than my trainers, for example the person responsible for the institution, association, department, etc... where I work, or any other person who can act as a reference to attest of my work with families and who is, if possible, an EFTA member.
4. An administrative fee of 38 Euros, to be paid according the instructions for payment (here-attached).

Remark : This fee is only administrative. When your application is accepted, you will have to pay an effective membership fee of 80 Euros for the current year.

Date and signature :

This application should be sent by email to:

[eftacim@gmail.com](mailto:eftacim@gmail.com)

or by mail to: EFTA-CIM

Rue de la Voie Cuivrée, 26

5503 Sorinnes

Belgium

P.S. : Do not forget to fill in the information sheet.

For information:

- *Your application will be submitted to the accreditation commission which meets approximately 2 times per year.*
- *If one or some items are missing, we will inform you.*
- *You will be informed about the decision of the accreditation commission after its meeting.*

# INFORMATION SHEET

LAST NAME :

FIRST NAME :

DATE OF BIRTH:

Home Address : street :

nr :

postal code :

town :

country :

Home telephone nr :

Mobile :

Home fax nr :

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Work Address :

NAME of institution, department, etc. :

street :

nr :

postal code :

town :

country :

Work telephone nr :

Work fax nr :

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Email address:

Personal website:

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## PROFESSIONAL QUALIFICATIONS

Basic diploma :

Further training in family therapy and/or systemic approach :

| <b>BASIC TRAINING in Family Therapy</b> |       |                 |
|---|-------|-----------------|
| Institute                               | Dates | Number of hours |
|   |       |                 |
|   |       |                 |

|   |  |   |
|---|--|---|
| <b>COMPLEMENTARY TRAINING in Family Therapy</b> |  |   |
|   |  |   |
|   |  |   |
|   |  | <b>TOTAL :</b><br><br>(minimum 700 hours<br>of training in at least<br>4 years) |

- Trainer(s) :

- Person to whom you are asking for the recommendation, concerned by item (3), to certify that your practice does well fit in the family therapy and/or systemic field :

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**CONCERNING PAYMENTS TO EFTA FOR ADMINISTRATIVE  
AND EFFECTIVE MEMBERSHIP FEES OF INDIVIDUAL MEMBERS**

We advise you to respect carefully the here-after conditions for safe and rapid treatment of your records in our books; they also avoid unnecessary expenses. Thank you.

FOR CANDIDATES AND MEMBERS RESIDING IN :

Belgium : You may pay on the EFTA account at the ING Bank nr 310-0943360-24.  
BIC:BBRUBEBB - IBAN: BE81 3100 9433 6024

France : You may send us a cheque in Euros and it will be put into our account in France.  
You may pay on the account : BNP Paribas : agence Maubeuge 00525 –  
RIB : 30004 00525 00009172960 56 - IBAN : FR76 3000 4005 2500 0091 7296 056  
BIC : BNPAFRPPVCS

In other countries Ask your bank to transfer the amount (free of charge for us) in Euros to our EFTA account in Belgium at ING, 205-207 av. Louise - 1050 Brussels –  
**BIC:BBRUBEBB - IBAN: BE81 3100 9433 6024**  
**Please do not use cheques anymore because we are very much charged.**

You may pay by Visa Card, Master Card or Eurocard. In this case, fill in the form here-after.  
Important : The amount must be in Euros.

Please send this form either to [eftacim@gmail.com](mailto:eftacim@gmail.com) or to  
EFTA Secretariat – rue de la Voie Cuivrée, 26 – 5503 Sorinnes (Belgium)

Last name, First name : .....

Address : .....

Tel. : .....

Enclosed is  a cheque

Please charge the amount of ..... Euros to my credit card :

Visa  Master Card  Eurocard,

N°

Expiry date : /

Date :

Signature :