

THE INTERNATIONAL REGISTER OF CONSULTANT
HERBALISTS AND HOMOEOPATHS



Trading as

The General Council and Register of Consultant Herbalists

Annual Application for Student Membership

Student membership includes free information on seminars organized both by the IRCH and other relevant professional bodies, also advice on any student matter.

Name:

Address:

.....

Post Code:

Telephone: (Home) (Work)

Occupation: Date of Birth: / /

Declaration

1. I declare that the foregoing information is correct.
2. I undertake to do all in my power to further the cause of natural therapeutics and to work for the continued success of the above Association.
3. I undertake not to act in any way so as to bring dishonour on or lower the prestige of the Association in any way.
4. I understand that my acceptance for Student membership does not confer upon me the status of a practitioner registered with the above Association.
5. I hereby apply for Student Membership and enclose a cheque or postal order for £90 made payable to the IRCH for one year's membership.

Signed: Date: / /

Please return this form and your cheque (payable to I.R.C.H.) to:

GCRCH Registered Office
1 Institute Row
Townshend
Hayle
Cornwall
TR27 6AQ

Telephone: 01736 850941 E-mail: office@irch.org

Please note all fee's are NON refundable