



AUSTRALIAN KINESIOLOGY ASSOCIATION INC.

Mail: PO Box 233 Kerrimuir VIC 3129 Email: enquiries@akakinesiology.org.au

Tel: 03 9898 7406 www.aka.asn.au

INTERNATIONAL KINESIOLOGY REGISTRATION

INTERNATIONAL MEMBER APPLICATION 1ST JULY 2020-2021

THIS IS A 4 PAGE DOCUMENT TO BE COMPLETED IN FULL

PLEASE PRINT CLEARLY –

If your membership application is not approved, your membership fee will be refunded in full, minus \$33.00 AUD administration fee

Personal Details – NOT Clinic or Practice (personal information is for AKA records only)

First Name: _____ Surname: _____

Residential Address: _____ State: _____ P/code: _____

Postal Address: _____ State: _____ P/code: _____

E-mail: _____

Home Phone: _____ Mobile Phone: _____

To be eligible for AKA International Membership you must meet all of the following criteria:

- I am a Registered Modality Instructor
- I am a Registered Kinesiologist with a Kinesiology Association in the country I reside/practise

Name of Kinesiology Association _____ Membership Number: _____

Email address of Kinesiology Association _____

- I hold an equivalent current First Aid Certificate (Please provide proof)
- I hold an equivalent current Professional and Public Indemnity Insurance Policy (Please provide proof)
- I have met my current CPE continuous professional education requirements as directed by the modality/Kinesiology Association listed above.

****Copies of your certificate as proof of Kinesiology Membership with the country you reside/practise must be included to validate membership.**

****Copies of your qualifications for modalities/courses to be included in this application.**



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INTERNATIONAL MEMBERSHIP REGISTRATION

Membership Fee of \$190.00 AUD for membership year 1 July 2020 to 30 June 2021.

Electronic Funds Transfer to **Commonwealth Bank of Australia**

Account Name: Australian Kinesiology Association

Swift Code: CTBAAU2S

BSB (Branch) **063115** Account **10301776**

Date Paid: ____ / ____ / ____

Name & Surname must appear in the description/reference – Limit of 18 characters

PayPal- if you nominate this payment method you will receive an email notification from PayPal prompting you to pay.

Post or Scan to AKA Office

PO Box 233 Kerrimuir VIC 3129

– Email: enquiries@aka.asn.au

You must complete, sign and date this section to validate your application or it will be refused.

Have you been convicted of a criminal offence? Yes No

Have you had a complaint made against you that has been discussed by a complaints or disciplinary body? Yes No

Are you subject to disciplinary or legal procedures relating to your practice? Yes No

Have you ever been refused membership or been expelled from another association Yes No

If you answered Yes to any of the above, you must provide full written details with your application.

I declare that the information in this application and supporting documentation is true and correct. I declare that I have obtained information from the AKA website: www.aka.asn.au – in particular “About Us” and Membership” and have read and agree to abide by the AKA Constitution & Bylaws, AKA Codes of Conduct, Ethics and Practice and AKA policies and to provide the highest professional conduct in all aspects of my Kinesiology practice.

Signature: _____ Date: ____ / ____ / ____



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- **International AKA Membership does not qualify you to practise in Australia as an AKA Registered Kinesiologist.**
- **International Membership with the AKA gives you:**
 - ✓ Eligibility to submit your course(s) for accreditation with the AKA Course Accreditation Board
 - ✓ Free listing of your AKA accredited course on the AKA homepage
 - ✓ Free listing of your AKA accredited course dates included in the AKA Diary Dates List on the AKA homepage
 - ✓ Quarterly emails sent to all members listing your AKA accredited course dates
 - ✓ Member rates for AKA In Touch advertising
 - ✓ Member rates to attend AKA National Conference
 - ✓ Eligibility to participate in free promotional advertising during AKA National Kinesiology Week on the AKA website.
 - ✓ The right to train/teach within Australia within your qualified modality.

THIS CHECKLIST MUST BE READ AS PART OF APPLICATION

You must return a completed and signed renewal form to the Australian Kinesiology Association office to validate your membership.

No paperwork = NO MEMBERSHIP

*****Copies of your certificate as proof of Kinesiology Membership with the country you reside/practise must be included to validate membership.***

*****Copies of your qualifications for modalities/courses to be included in this application.***

Payment by bank transfer

- ✓ NOTE bank details. **Only use the details on the application form.**
- ✓ Remember to include your name in the description/reference section – Limit of 18 characters.



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- ✓ Paperwork must be **posted or emailed without delay once the EFT is complete.**
- ✓ **Disclaimer:** Payments without full details cannot be processed.

Payment by PayPal

- ✓ An email will be sent to you from PayPal prompting payment via credit card
- ✓ Ensure that your card remains current for the month you are paying this account.

Finally

- ✓ Ensure that you have signed and completed the declaration at the bottom of the renewal form.

Yours In Kinesiology

The Australian Kinesiology Association Inc.