

**Application to join HEALTH NUTRITIONIST**

***Please enclose a brief CV detailing current and previous work experience.***

**Name:**

**Address:**

**Tel e-mail**

**Website OR LinkedIn**

**Qualifications:**

 ***(include university and dates of degrees)***

**Registered with which professional bodies *(include registration numbers):***

* **Association for Nutrition: Full/Associate\* Registration Number:**

**(\*delete as applicable)**

* **Health and Care Professionals Council: Registration Number:**
* **Other Professional Bodies/|Organisations:**

**Where do you work?**

**What are your job responsibilities?**

**How did you find out about Health Nutritionist?**

**Why have you decided to join our community?**

**What would you like from joining Health Nutritionist?**

**Nutrition Profile BIO:**

**Title and Name**

**Qualifications**

**Five main areas of work interest:**

***I wish to apply for\**:**

**Full membership £120.00**

**Trainee membership (recent graduates under 1 year experience) £70.00**

**Please note that the membership year runs from the date your application is accepted.**

**No refunds are available,**

**Signature Date**

Please reply with this form and your CV by email to:

Administrative Co-ordinator, Health Nutritionist: Charlotte@healthnutritionist.co.uk

Website: http://www.healthnutritionist.co.uk

**For Office Use Only:**

**Received: Actioned**

**GENERAL DATA PROTECTION REGULATION (GDPR)**

As outlined in Health Nutritionist GDPR Policy Statement - https://www.healthnutritionist.co.uk/privacypolicy

Data supplied to Health Nutritionist by you via your membership application form, website entry, register entry or other forms of communication (eg email) may be passed on to outside agencies eg. companies/individuals seeking information on individual nutritionists with a view to possible employment.

Health Nutritionist seeks to be transparent about how it holds and uses your data (as outlined in its Privacy Notice and Policy Statement). Accordingly, all members are given the opportunity to opt out or restrict the processing of the data provided by them. For this reason you are asked to complete and return the form below (by post or email) as soon as possible to:

Email: Charlotte@healthnutritionist.co.uk

Address:

Health Nutritionist

6 Greenfinch Drive

Twyford

Berkshire

RG10 9JE

If you do not return the form, Health Nutritionist will not be able to process your data.

✂ -----------------------------------------------------------------------------------------------------------------------------

I am willing for Health Nutritionist to process my personal data in full or part to perform its tasks as outlined in the GDPR Policy Statement 🞏

I am not willing for Health Nutritionist to process my personal data in full or part to perform its tasks as outlined in the GDPR Policy Statement 🞏

Signed ………………………………………. Name

Date ………………………………………….