

Irish Yoga Association

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Membership Application / Renewal Form

Application for Membership of the Association or Renewal of your current Membership of the Association.

All fields in Block Capitals please

Full Name:	
Address:	
Tel Home:	
Mobile:	
Email Address:	

Membership Type:

Are you currently a yoga teacher?

If you answered Yes to the above question please give qualification details:

Activity Interest:

Training:	Yes	No
Newsletter:	Yes	No
Seminars:	Yes	No

Additional Expertise:

Marketing/PR:	Yes	No
Computer Skills:	Yes	No
Accounting:	Yes	No
Legal:	Yes	No

IYA TEACHERS ONLY: Do you wish your classes to be listed on our Website?

If Yes, please specify exact details as follows:

Name: _____ Phone: _____ Email: _____
Class Location: _____ Level: _____

Please complete and return the form above to the following address:

Van Gillissen, Membership Secretary, Irish Yoga Association, Wood of O, Tullamore, Co. Offaly, Rep of Ireland.

Please fill out the Bank Standing Order Form below

€30 for Associate Membership, €35 for Full Membership IYA Diploma Holders only, Special circumstances facilitated.

IRISH YOGA ASSOCIATION STANDING ORDER FORM FOR PAYMENT OF MEMBERSHIP FEE

To the Manager (Your Bank/Building Society) _____

Branch Name and Address: _____

Account Number _____ Sort Code _____

Please pay Bank of Ireland, College Green, Dublin 2 in favour of Irish Yoga Association

Account Number 49642506

Sort Code 90-00-17

The amount of € _____ Please pay this amount annually from April 20 _____

Signed _____ Name (please print) _____ Date: _____