



Affiliate membership of the Association of Tongue-tie Practitioners (ATP) is open to anyone who is interested in raising the awareness of tongue-tie and would like to benefit from sharing professional experiences.

The ATP adheres to the International Code of Marketing of Breastmilk Substitutes. Applications to become an affiliate member of ATP require that individuals adhere to this and all other aspects of the ATP Constitution. The Constitution can be viewed on the **ATP website [www.tongue-tie.org.uk](http://www.tongue-tie.org.uk)**

Membership fees are **£36** per year if paying by cheque , cash  or bank transfer   
Please make cheques payable to **ATP**.

Membership fees are **£30** if completing a standing order form - see overleaf or next sheet   
Please tick your payment choice in one of the boxes above

Bank Details for bank transfer: Association of Tongue-tie Practitioners  
Sort Code 20-40-71 Acc No 13418928

Membership runs from 1<sup>st</sup> January to 31<sup>st</sup> December but annual payment is due on 1<sup>st</sup> December. If you are joining the ATP mid-year and plan to pay by standing order, it would be appreciated if you could pay your first instalment of £30 by cheque, cash or bank transfer and complete your standing order to commence on the following 1<sup>st</sup> Dec. Please contact [membership@tongue-tie.org.uk](mailto:membership@tongue-tie.org.uk) if you wish to clarify.

Please note, if your subscription expires e.g. due to non-payment, you will be reminded twice and then your membership will be terminated. A charge of £10 in addition to your subscription will be required to re-instate your membership.

**APPLICATION FORM TO BECOME AN AFFILIATE MEMBER**

WHERE DID YOU HEAR ABOUT THE ATP? .....

PERSONAL DETAILS	
Name	
Home address in full	
Home telephone number/s	
Work telephone number/s	
Email address	

WORK DETAILS			
Qualifications		Voluntary role	
Place of work		Position held	
Details about breastfeeding clinics / support group where you work			
Interest or expertise			

Signature..... Date.....

**Thank you for joining us! Please forward application form & method of payment to:**

Deb Wilson, ATP Membership Secretary  
8 The Croft , Ulgham, Morpeth  
Northumberland, NE61 3BB  
Email: [membership@tongue-tie.org.uk](mailto:membership@tongue-tie.org.uk)



## Standing Order Form for ATP Membership

Please complete the following

To: The Manager of ..... Bank  
.....  
.....  
.....

(please insert your bank's full address)

Please pay to

**Barclays Bank**

Sort Code **20-40-71**

For the credit of the **Association of Tongue-tie Practitioners** Account Number **13418928**

The sum of £30 annually on the **1st December** until further notice.

Name.....

Address.....  
.....  
.....

Account name .....

Account number .....

Sort code .....

Signature:.....

**Please return to:**

Deb Wilson, ATP Membership Secretary  
8 The Croft , Ulgham, Morpeth  
Northumberland, NE61 3BB

Email: [membership@tongue-tie.org.uk](mailto:membership@tongue-tie.org.uk)

**Office use:**  
Photocopied  
Sent to bank  
Check first payment