

For AAFT Office Use Only
 ID#: _____

Fellow Membership Application Form

Please () as appropriate.

		Annual Subscription Fee (US Dollar)	Three-year Subscription Fee (US Dollar)
<input type="checkbox"/>	Fellow	US\$210	US\$630

PART I: Personal Details

- Family therapist Psychotherapist Counselor Social worker
 Medical practitioner Nurse Teacher Others _____

(Prof/ Dr/ Mr/ Ms*) First name: _____ Last Name: _____

Name in other languages (if applicable): _____

Name of Organization: _____ Position Held: _____

Correspondence Address: _____

Phone no: _____ Fax no: _____

E-mail address: _____

Would you like to be listed in our online directory? Yes No

PART II: Education

Please begin with your graduate education and include any certificate or post degree training programs.

Educational Institution [#]	Major	Certificate/Degree Earned	Dates (To/From)	Date Earned

[#]A copy of the academic certificates and/or qualification proof must be submitted together with the completed application form.

PART III: Supervised Clinical Practicum

Applicants should provide a record of having received a minimum of 150 hours of supervision.

Name of Educational Institution	Course #	Supervisor(s)	Dates (To/ From)	Total # Client Contact Hours Earned

PART IV: Specialized Area(s) of Expertise or other Professional Achievements

Area(s) of Expertise or Professional Achievements	Awarding Institution	Date Earned

PART V: Nomination

Proposed By:	Seconded By:
_____ Name	_____ Name
_____ Signature	_____ Signature
_____ Date (DDMMYY)	_____ Date (DDMMYY)

PART VI: Checklist

<p>Before submitting the form, please ensure that you have provided the following supporting documents:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Certificate of graduation from Master’s degree or above in marriage and family therapy, human services field or equivalent; <input type="checkbox"/> Clinical experience record indicating you have fulfilled a minimum of 3 years of post-graduate experience in working with families and/ or systemic work; <input type="checkbox"/> Record of number of supervised hours and name(s) of supervisor; and <input type="checkbox"/> Enclosed a cheque or completed the membership dues payment online.

PART VII: Acknowledgement and Declaration

- *I hereby agree and authorize the Academy to use the information that I have provided in this membership application form for assessment and other membership-related service purposes. I understand that the membership category to which I may be admitted shall be that deemed by the Academy to be appropriate, and I agree to abide by the articles, rules, and regulations of the Academy.*
- *I declare that the information provided in this application are true. I understand that any willful misstatement will render my membership application/ status liable to disqualification.*

Signature of Applicant: _____ Date: _____

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Application form received on: _____

Information checked by: _____ on (DDMMYY) _____

Accept / Reject Application (Please delete as appropriate) on (DDMMYY) _____

Signatures by vetting committee:

_____ Name	_____ Name	_____ Name
_____ Signature	_____ Signature	_____ Signature
_____ Date	_____ Date	_____ Date

Comments:

Membership Category Description

Membership Categories

- a. Honorary Fellow
- b. Fellow
- c. Full Member / Life Member (one-off)
- d. Student Member
- e. Organizational Member

Membership Criteria

- a. Honorary Fellow
Honorary Fellow is awarded by invitation only to practitioners who has demonstrated distinguished contributions to the advancement in the field of marriage and family therapy, specifically in areas such as advanced practice, research, teaching, and policy making.
- b. Fellow[#]
An applicant who is interested in becoming a Fellow should:
 - possess a Master's or Doctoral degree in marriage and family therapy, related mental health field, or equivalent;
 - have at least three years of post-graduate experience in working with families, including case practice, systemic training;
 - accumulated a minimum of 150 hours of supervision (including individual and group) by AAFT approved Supervisors;
 - be nominated by two AAFT Fellows; and
 - be approved by Vetting Committee of AAFT, which is comprised of senior practitioners from Japan, Korea, Taiwan, Hong Kong, and Mainland China.

#Details will be confirmed shortly.
- c. Full Member / Life Member (one-off)
An applicant is eligible to become a Full Member if he/she has attained educational requirements for licensure or certification in the human services profession or equivalent. He/ She can pay a one-off membership fee to become a Life Member.
- d. Student Member
An applicant is eligible to become a Student Member if he/she is enrolled in a degree program in marriage and family therapy, human service programs, related mental health field, or equivalent.
- e. Organizational Member
Organizational membership is designed for professional or social service organizations/ associations/ societies/ institutions who share the mission of AAFT. Each Organization may nominate up to three members who will be eligible for AAFT membership.

Application Procedure

All applications will be reviewed by the Vetting Committee comprised of the AAFT Clinical Directorate and AAFT Membership Committee, the latter of which includes the Membership Committee Chairperson and a list of regional representatives.

Please send your completed application together with **all related documents** to:

Membership Committee, Asian Academy of Family Therapy Limited, No. 4 Pottinger Street, Central, Hong Kong. Successful applicants will be notified in writing and will receive a certificate signed by the Clinical Directorate of AAFT.

Membership Fees¹

Categories	Annual Subscription Fee (US dollar)	Three-year Subscription Fee (US dollar)
Fellow Member	US\$210	US\$630
Full Member	US\$150	US\$450
Student Member	US\$110	
Organizational Member	US\$520	

Categories	Subscription Fee (US dollar)
Life Member*	US\$1,320*

¹ Membership fee is non-refundable unless the application is unsuccessful.

*Full Members may choose to pay the Life Member fee for permanent Full Membership.

Payment Method:

- a. Send in a crossed cheque made payable to **Asian Academy of Family Therapy Limited** by post;
- b. Mail the bank-in slip (*please write your name and "membership application" at the back*) to AAFT by post or by email at info@acafamilytherapy.org.
 Account Name: Asian Academy of Family Therapy Limited
 Account No.: 024-769-168832-668
 Bank Name: Hang Seng Bank Limited
 Swift Code: HASEHKHH
- c. Pay online by credit card:
Fellow Member Application USD (Annual) <https://buy.stripe.com/8wM2c59d58Kog2AfZk>;
Fellow Member Application USD (Three-year) <https://buy.stripe.com/28o03Xexp5yc17G29H>

Benefits to Members

- Members have access to the facilities at AAFT and can enjoy discount for selected trainings and workshops.
- Members will be entitled to join one live case demonstration on a first come, first served basis. (Please email membership@acafamilytherapy.org for reservation.)
- Members residing in Hong Kong will be eligible for professional indemnity insurance offered through AAFT.
- Members have opportunity to engage in AAFT's diversified clinical projects.
- Members can participate in AAFT's peer-group learning, collaboration, and sharing of ideas and experiences.
- Members can use the title, "AAFT Honorary Fellow/ Fellow/ Life Member/ Full Member / Student Member/ Organizational Member".
- The American Association for Marriage and Family Therapy (AAMFT) accepts applications for professional membership from individuals who hold AAFT Fellow status.
- AAFT Members can enjoy discounted rates at our annual conference.