

# Association of Independent Celebrants

## Application for Full Membership



Applicants Name.....  
Trading as.....  
Position/Title..... Trading Since.....  
Address.....  
.....  
Tel:..... Mobile:.....  
Email:.....  
Website.....

Are you happy for the AOIC to show all your contact details for advertising purposes? (if NO, please state which ones we can use)

.....  
*Please note the AOIC will only ever use your contact details for the benefit of marketing your business, ie via our website or to your local funeral directors etc..we will never pass your details on to direct marketing companies etc.*

Please state which County you would like to be listed under.....

Please tick which ceremonies you intend to offer:

Funerals  Weddings/Renewal of Vows  Baby namings  Civil Partnership Ceremonies/Blessings

Pet Funerals  Other (Please state).....  
.....

### Please list details below of Celebrant/Clergy Training or Courses taken (Please provide copies of certificates achieved)

Course Title..... Course Tutor.....

Dates.....

Address/Telephone Number.....  
.....

Other relevant experience/courses taken.....  
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Please sign below to confirm all the above information is correct.

**Please send this form to the address below:~ along with a signed copy of the AOIC's 'Terms and Conditions' a cheque for £96.00\* (one years membership) and if possible a recent photograph.**

Signed..... Dated.....

\* Cheques to be made payable to the 'ASSOCIATION OF INDEPENDENT CELEBRANTS' please.

President: Debbie Brooke

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