

**Certified Transactional Analyst Members  
 ITA Website and/or Directory Inclusion 2011-2012**

The ITA Register is published on the ITA public website and/or ITA directory and is available to anyone requesting information from the ITA. Contact information can be given out only as endorsed below.

**1) Full Name** \_\_\_\_\_

**Your details must match ITA records. If you have moved, please update the ITA Administrator:**

Home Address \_\_\_\_\_

Home Post Code \_\_\_\_\_ Home Telephone \_\_\_\_\_ Home Fax \_\_\_\_\_

Home Email address \_\_\_\_\_

**2) Provide only the details which you wish to be published**

Name and qualifications: \_\_\_\_\_

Address: \_\_\_\_\_

Post Code \_\_\_\_\_ Telephone \_\_\_\_\_ Practice Fax \_\_\_\_\_

Email address \_\_\_\_\_ Website address: \_\_\_\_\_

**In addition to the above details (section 2) you may enhance your listing on both the ITA Web Site and in the 2012 Directory, please complete below:**

Web Site Entry + ITA Directory	Name, Address as detailed in section 2 above	FREE	Amount Enclosed
Web Site Entry	Name, Address as detailed in section 2 above <b>Plus up to 20 words</b>	£ 10.00	
2012 Directory	Name, Address as detailed in section 2 above <b>Plus up to 20 words</b>	£ 20.00	
2012 Directory Boxed	Name, Address as detailed in section 2 above <b>Plus up to 50 words Boxed</b>	£ 30.00	
2012 Directory	Full Page Advert – <i>email pdf or word document</i>	£ 90.00	
2012 Directory	Half Page Advert – <i>email pdf or word document</i>	£ 65.00	
2012 Directory	Quarter Page Advert – <i>email pdf or word document</i>	£ 45.00	

**Adverts - submit to 'admin@ita.org.uk' as pdf or word document only.**

Enhanced wording: \_\_\_\_\_

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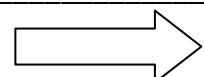
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**3. Please complete the declaration over the page before returning to the ITA.**



**Requirements for inclusion, which must be met by CTA members:**

- Valid Contract with EATA
- No outstanding complaint sanctions
- Paid up membership
- Annual form signed by Principal Supervisor (*this form*)

Inclusion on the ITA Register is conditional on you meeting the above requirements, remaining in supervised practice and having the continuing consent of your Principal Supervisor to your name being included. You and your Principal Supervisor have joint responsibility to ensure these conditions continue to be met. In the event of the conditions ceasing to be met, you and your Principal Supervisor are jointly responsible for advising the Administrator that your name should be removed from the register. Your membership status will be entered as:

***Certified Transactional Analyst with [Counselling/Educational/Organisational/Psychotherapy\*\* speciality]. ITA Registered.*** \*\*Delete \*\*

**Please include my details in the ITA Register as ticked above.**

**I confirm I meet the above requirements and I understand I must inform the ITA Administrator of any changes to my name, address, training status or, in case of complaint, sanctions. I verify the details given to be accurate.**

Signed \_\_\_\_\_ Printed \_\_\_\_\_ Date \_\_\_\_\_

**Endorsement of Principal Supervisor with whom you have a training contract**

**I confirm that the above named is in regular supervision with me and meets the requirements to be included on the ITA Register.**

Signed \_\_\_\_\_ Name Printed \_\_\_\_\_ Date \_\_\_\_\_

PTSTA / TSTA (please delete as applicable)