

**World Federation of Athletic Training and Therapy**

**Application for Membership**

Membership in the Organization shall be limited to any Association, Organization or similar organized group interested in furthering the objects of the Organization, and whose application for admission as a member has been approved by the Board of the Organization.

Membership is open to associations and organizations of professionals whose scope of practice includes the prevention, care, and rehabilitation of athletic and sports related injuries and conditions. More than one association/organization from a country can be approved for membership in the WFATT.

When preparing your application, please begin each section on a new page. Respond to each section in order. Feel free to include any additional information about your association/ organization.

Please submit your completed application electronically to:

Dr. Brian Zeller, President
World Federation of Athletic Training and Therapy
wfattpresident@gmail.com

**SECTION 1**

a) Name of your Association/Organization
b) Date of application
c) Country
d) Head office address and contact information
e) WFAT delegate name and contact information
(Please include www address/URL, e-mail addresses, telephone & fax numbers)

**SECTION 2**

a) Please tell us about your association/organization.
b) Describe how your association/organization is structured and how it operates.
(i) Include the mission and goals/objectives of your organization.
(ii) You may wish to include an organizational chart or diagram.
(iii) Describe your membership categories and the requirements for each.
(iv) Are your members regulated by the government? If so, please describe this briefly
c) Number of members
d) Officers of the association/organization (names and offices and contact information)
e) Number of members in each membership category.
f) Does the association/organization certify or license its members? If yes, please describe this process.

g) When was your association/organization founded?
h) Is the association/organization incorporated?
i) Which of the following best describes your association/organization?

Professional association/organization
Interest group (affiliated with a professional organization)
Other (please describe)

j) Is the association/organization national, regional, or local?

**SECTION 3**

a) Why does your association/organization want to join the WFATT?
b) Outline how the association/organization plans to participate in the WFATT.
(This may involve sending a delegation to meetings and congresses, hosting congresses, etc.) c) Have you sent a delegation to previous world congress meetings?
If yes, please tell us when and who attended.

**SECTION 4**

a) Name(s) and office(s) of person(s) completing this application
b) Address and contact information of person(s) completing this application

**SECTION 5**

a) Include a letter from your chief executive officer authorizing the application to the WFATT. b) You may also consider including any other reference letters from other national associations, government agencies, etc which support your association and its membership in the WFATT.