



## Individual Member Application Form 2021

Applicant Full Name

City of Residence	Country of Residence
Email	Phone Number
Website	Social Media

Affiliation	
Affiliation Address	
Website	Social Media
Role in the Affiliated Institution	

<p>Please briefly explain your experience and involvement in marine turtle rescue and rehabilitation and why would you like to join STRA. <span style="float: right;">(max 1500 characters)</span></p>



## Individual Member Application Form 2021

I am applying to become a member of the Sea Turtle Rescue Alliance

Tier 1 – Rescue and Rehabilitation Specialists

Tier 2 – Veterinarians

Professional Certification (Type)	Certification Number*

\*Please provide your veterinary certificate with this form.

By submitting this form for consideration, I consent that the STRA may use my name as and when applicable for this project. STRA agrees not to otherwise represent the partner organisation in any other way without further express consent.

Yes, I consent.

No, I do not consent.

I herewith agree to the Charter and such relevant Terms and Conditions, as may be in place from time to time, of being an Individual Member of STRA. I confirm that I have read and understood the Sea Turtle Rescue Alliance Charter.

<https://seaturtlrescuealliance.org/charter/>

I confirm, acknowledge and agree to the criteria of membership eligibility

I do not confirm, or acknowledge and agree to the criteria of membership

By submitting this form, I accept the Terms & Conditions and the Privacy Policy of the STRA website.

<https://seaturtlrescuealliance.org/privacy-policy/>

<https://seaturtlrescuealliance.org/legal/>

I accept

I do not accept

Name and Date	Signature
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