

# **APPLICATION FOR INDIVIDUAL REGISTRATION REGISTERED INTERNATIONAL SPORTS PHYSICAL THERAPIST**



You must have met the requirements set forth by your member organization to apply. Your level of achievement will be confirmed with your national organization

NAME

ORGANIZATION

AUSTRALIA

NEW ZEALAND

BELGIUM

NORWAY

CANADA

SWEDEN

DENMARK

SWITZERLAND

IRELAND

UK

ITALY

UNITED STATES

THE NETHERLANDS

ADDRESS

CITY

STATE/PROVINCE

COUNTRY

POSTAL CODE

EMAIL ADDRESS

FACEBOOK

TWITTER

LINKED IN

INSTAGRAM

**Please save this completed form as Registration Form\_(your first initial and last name).pdf and email to [mwilkinson@ifspt.org](mailto:mwilkinson@ifspt.org) for processing.**

Once your application and payment have been received, please allow at least 30 days for us to confirm your level of achievement with your parent organization and prepare your printable certificate.

Please watch your email box for your certificate, including your spam.