Why should you become a member of the Association of Health Reformers (AHR)? If you are a health professional wanting to transition in to the medical missionary field or you are an experienced medical missionary/health evangelist then AHR is the professional body that will offer a network of experience, skills and knowledge that you can make use of for your own practice.

**Membership Benefits**

**1. Networking Opportunities**

Members will feel a sense of community, to meet new people, and find opportunities to grow personally and professionally. You will be able to network, engage with each other, and share meaningful conversations. For example:

* Be part of a small networking event (in-person or virtual).
* A member of our online chat room where you can discuss common interests.

**2.** **Feature Members on our Membership Website**

* Any members with big news or accomplishments worth celebrating will feature in the monthly magazine.
* We may feature members randomly, just to encourage members to get to know each other and see if they have any common interests.
* Invite members to apply to be featured, in case you want to promote your ministry or small business.

**3. Membership Discounts**

* Membership discounts to AHR events
* Advertise your ministry and business for free in the AHR monthly publication
* Offer membership discounts to health retreats or similar *(subject to terms and conditions) e.g. Manna House, Unochenta Farm, Health Retreat*

**4. Career Advice & Support**

Provide members with resources and support.

* Members have access to valuable resources, courses, and publications.
* Members can use to ask career-related questions

**5. Preceptorship Programme for recently trained medical missionaries**

Our members will have access to a preceptorship programme where you will be able to meet one of the executive team on a regular basis. The preceptorship sessions will allow you to:

* Exchange ideas and share relevant information or resources.
* Set career goals and create plans of action.
* Identify challenges and ways to overcome them.

**6. Membership Directory**

Members will be listed either privately or publicly on our AHR membership directory. Members can use it to:

* Network with each other and build relationships.
* Find fellow members with common interests.
* Promote their own services or businesses and attract new clients.

**7. Virtual Events**

Members will have the opportunity to learn and grow in an easy, convenient way by attending free or discounted [virtual events](https://www.wildapricot.com/online-event-registration-software) in which you can attend from anywhere. We also encourage members to:

* Webinars
* Panel discussions
* Live trainings
* Case studies

**8. Use of the AHR Zoom Platform**

Members will have access to use the AHR zoom platform for use for their own ministry as and when required *(conditions apply).*

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| **Health Reformer code of conduct***(Section 7)* |
| * Treat people as individuals and uphold their dignity
* Listentopeopleandrespondtotheirpreferencesandconcerns
* Make sure that people’s physical, social and psychological needs are assessed and responded to
* Act in the best interests of people at all times
* Respect people’s right to privacy and confidentiality
* Always practise in line with the best available evidence
* Communicate clearly
* Work co-operatively
* Share your skills, knowledge and experience for the benefit of people receiving care and your colleagues
* Keep clear and accurate records relevant to your practice
* Be accountable for your decisions to delegate tasks and duties to other people
* Have in place an indemnity arrangement which provides appropriate cover for your practice
* Recognise and work within the limits of your competence
* Be open and candid with all service users about all aspects of care and treatment, including when any mistakes or harm have taken place
* Always offer help if an emergency arises in your practice setting or anywhere else
* Act without delay if you believe that there is a risk to patient safety or public protection
* Raise concerns immediately if you believe a person is vulnerable or at risk and needs extra support and protection
* Be aware of, and reduce as far as possible, any potential for harm associated with your practice
* Uphold the reputation of your profession at all times
* Fulfil all registration requirements relevant to your profession
* Cooperate with all investigations and audits
* Respond to any complaints made against you professionally
* Provide leadership to make sure people’s wellbeing is protected and to improve their experiences of the health and care system

I confirm that I have read the above code of conduct and will adhere to the guidance as long as I am a member of the Association of Health Reformers LtdSignature: Date: |

**Application for Membership**

Those with a willingness to join the association will have to demonstrate through evidence on their application form and subsequent discussion, their passion and desire to use only God’s simple natural methods including herbs and hydrotherapy and other natural methods through witness statements and/or testimonies from clients they have worked with. They will also need to provide at least two references including one from their local pastor.

* Please fill out all necessary details including your method of payment and the direct debit mandate, (if applicable).
* Please sign the code of professional conduct.
* The minimum age for membership is 18 years old.
* You must be a qualified health professional of at least level 4 upwards or equivalent OR you are already working as a Medical Missionary/Health Evangelist in the field.
* You must be a Seventh Day Adventist (SDA) and a member of a local SDA church.

**IMPORTANT - DATA PROTECTION**

The Association of Health Reformers (AHR) may collect and process information about our members. The Data Protection Act 2018 requires AHR to obtain your agreement before this can be done. In signing this form you are giving consent for your personal and sensitive information to be processed under the rules and safeguards laid down by the 2018 Act. AHR has procedures in place to ensure that all information held about you will be dealt with confidentially, held securely and only processed in accordance with AHR notification to the GDPR, who administers the Act. AHR may wish to contact you for marketing purposes.

**Thank you for taking the time to complete your application carefully and we look forward to welcoming you to the Association of Health Reformers Ltd.**

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| **Personal Details** *(section 1)* |
| Surname: |
| First name: Date of birth: |
| Address: |
|  |
|  |
|  Post code: |
| Home number: Mobile number: |
| E-mail: |
| **Membership grade applied for *(please tick) –*** *(Section 2)* |
| \*Membership (including insurance): (£10.00 per month)*(Conditions apply: it is important that you keep up to date and current with your monthly subscription. Failure to do so will result in cancellation of membership after 2 consecutive months of non payment)* |

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| **Professional Qualifications** *(Section 3)* |
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| Institution  | Qualification | Grade | Year |
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| **Church where membership held** *(Section 4)* |
| Church name: Pastor’s/Elder’s name: |
| Contact details: |
|  |
| **Non Professional Medical Missionary (no formal healthcare qualifications)** *(Section 5)* |
| Are you active in the medical missionary field? Yes No  |
| **Medical Missionary Training** |
| Institution | Trainer | Course | Year |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| If no, what do you hope to achieve being a member of the association and what do you think you can offer? *(continue on a separate sheet if necessary)* |
| **Do you carry Full Public Liability Indemnity Insurance?** |
| Yes No  |
| **Office use only** *(Section 6)* |
| Date membership started: Membership type: |
| Membership number: Payment type: |
| AHR name: AHR signature: |
| **Declaration** *(Section 7)* |
| I confirm that all the answers above are true to the best of my knowledge. Signature: Date: |

Please use the following payment details for the initial £25 membership joining fee followed by monthly payments according to the membership grade applied for in Section 2:

**Association of Health Reformers CIC**

**Wise**

**Sort Code: 23-14-70**

**Account No: 26436965**

**Quick Payment Link:**

[**https://wise.com/pay/r/hwXDfcmnSBqGZrY**](https://wise.com/pay/r/hwXDfcmnSBqGZrY)

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| **Health Reformer code of conduct***(Section 7)* |
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* Always offer help if an emergency arises in your practice setting or anywhere else
* Act without delay if you believe that there is a risk to patient safety or public protection
* Raise concerns immediately if you believe a person is vulnerable or at risk and needs extra support and protection
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* Fulfil all registration requirements relevant to your profession
* Cooperate with all investigations and audits
* Respond to any complaints made against you professionally
* Provide leadership to make sure people’s wellbeing is protected and to improve their experiences of the health and care system

I confirm that I have read the above code of conduct and will adhere to the guidance as long as I am a member of the Association of Health Reformers LtdSignature: Date: |

Out of the four books listed below please tick the one/s you have read or are familiar with?

* Broken Blueprint
* Ministry of Healing
* Counsels on Diet and Foods
* The Medical Ministry