



British Polygraph Association Membership Application

Note to Applicant: Type or Print all Answers - All items must be answered fully. Include additional information for consideration on a separate sheet of paper if necessary.

Mr. Mrs. Miss

First Name

Middle Name

Last Name

Status:

Private

Government

Other

Class of Membership Desired:

Member

International Member

Alias (es) Nicknames (s) or changes in name (Other than by marriage) _____

Date of Birth (Day, Month, Year) _____

Place of Birth (Town / Country) _____

Residence Address (Include post code)

Business Address (Include post Code)

Telephone: Home ()

Business: ()

Send Mail to: Residence

Business

FAX: ()

Email:

http://



Present Occupation: (If not self employed, indicate name and address of employer)

Percentage of Time devoted to Polygraph work? _____

POLYGRAPH EXPERIENCE

Number of Tests Conducted outside of training:

Total Hours Spent Conducting Those Tests:

Type & Number of Cases:

Specifics: Pre-Employment Screening: General Screening: Other:

If you have been involved in teaching polygraph; in research or polygraph related matters; authored any publication pertaining to polygraph; or have any scientific or specific skills, please explain on a separate sheet of paper.

Date _____ State _____ County

of _____



The British Polygraph Association 2 George Street Grays Essex RM17 6LY UK
secretary@britishpolygraphassociation.org

I, _____, after being duly sworn, do solemnly swear that I am the applicant named in this application and attachments thereto. I have read and understand the contents herein, and to the very best of my knowledge and belief, the foregoing answers and statements are both complete and true.

I hereby grant authorisation to the British Polygraph Association and/or their designated agents to contact any and every person and organisation for information regarding me. This authorisation includes the verification of any statement or statements made by me or about me, my employment history, my character, my department, my military history, or my conduct.

I further agree that any mis-statement or omission of fact will constitute sufficient grounds for rejection of my application, and/or termination from membership in the British Polygraph Association. A photocopy of this release shall be considered as effective and binding as the original hand executed copy. The BPA do not recognise any other Association that does not hold minutes or records of validation. Membership of such will exclude membership applications.

I FURTHER AGREE TO HOLD SAID BRITISH POLYGRAPH ASSOCIATION, ITS MEMBERS, EXAMINERS, OFFICERS AND AGENTS, FREE FROM DAMAGE, LIABILITIES OR COMPLAINT, BY REASON OF ANY ACTION THEY, OR ANY OF THEM TAKE IN CONNECTION WITH THIS APPLICATION.

SIGNED _____ DATE _____

Please print then scan and email this form to the BPA Secretary Patti Musicaro:

secretary@britishpolygraphassociation.org

(Please remember to attach copies of certificates and a head and shoulder photograph)