



****NUTRITIONAL THERAPIST OF IRELAND (NTOI) ELECTRONIC MEMBERSHIP
CONSENT****

By completing and submitting the online application form, you acknowledge and agree to the following conditions regarding the collection, processing, and storage of your personal and professional information by the Nutritional Therapist of Ireland (NTOI):

****Consent:****

I, (NTOI member), electronically provide my consent for the NTOI to collect, process, and store my personal and professional information for the purpose of membership management and communication.

****Purpose of Data Processing:****

1. Membership management, including renewal and updates.
2. Communication related to NTOI activities, events, and relevant information.
3. Compliance with legal and regulatory requirements.

****Data Protection:****

I understand that the NTOI will take all necessary measures to safeguard my personal and professional information and will not disclose it to third parties without my explicit consent unless required by law.

****Declaration:****

I acknowledge that providing false information may result in the termination of my NTOI membership. I also understand that I have the right to request access to and correction of my personal data held by the NTOI.

****Electronic Signature:**** Tick consent box on your membership application form

Thank you for your electronic consent to the above conditions.

NTOI Contact: info@ntoi.ie

