MEMBERSHIP DECLARATION

As a member organization of the International Association of Human-Animal Interactions Organizations (IAHAIO), we endorse and agree:

1. To further and promote IAHAIO’s mission and goals.

2. To adopt IAHAIO’s “One Health, One Welfare” interdisciplinary approach in carrying out animal-assisted interventions (AAI), that the health and wellbeing of humans and animals are interconnected, and that it would be unethical to carry out any AAI with the goal of improving a patient’s welfare while compromising the wellbeing of the animals involved.

3. To follow, whenever applicable, the guidelines as set out in the:
   a. IAHAIO White Paper (using the correct definitions)
   b. IAHAIO International Guidelines on Care, Training and Welfare Requirements for Equines in Equine Assisted Services and the guidelines for other animals in AAI
   c. IAHAIO Declarations and IAHAIO Position Statements

4. To only use the IAHAIO Member Logo while our organization remains a member of IAHAIO and in the prescribed manner.

5. To pay for the stipulated membership fees promptly, within the timescale specified in the invoice.

6. That our membership will only be activated/renewed upon payment of the stipulated membership fees.

7. To represent the organization in a professional manner through:
   a. Providing services with honesty and respect for all parties involved
   b. Promotion of evidence-based methods in AAI practice
   c. Minding the environmental impact of the services provided
   d. Supporting the principles of equality, diversity and inclusion
   e. Valuing and respecting the privacy of beneficiaries involved
   f. Maintaining professionalism, and sharing knowledge and practice with other colleagues within the industry

8. To update IAHAIO immediately of any change in our organization’s contact details, status or range of activities.

| Type of membership | 
| Fees payable/date of payment | 
| Name of the organization | 
| Address of the organization | 
| Email address of the organization | 
| Representative of the organization (this will be the main contact with IAHAIO and whom the fee invoice will be sent to) | 
| Email address of the representative | 

Completed by
Name of organization representative and position:

Membership Declaration V1.0

October 2021