

STATUTORY DECLARATION

I, (enter your full name and address, as it appears on the Register),

.....
.....

.....do solemnly and sincerely
declare as follows:

In accordance with s11(b) of the Hearing Aid Council Registration Rules 2007, I confirm that I am not aware of any reason for the institution of proceedings against me which may lead to the erasure of my name under s7 of the Hearing Aid Council Act 1968 (as amended).

AND I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the Statutory Declarations Act 1835.

Declared before me aton the day of.....2008

Signed.....

(Person or officer taking the declaration)

Qualification.....

(Qualification of person or officer taking the declaration)

(Official Stamp of person or officer taking the declaration)

SIGNED.....

(Signature of Registered Person)