

# Membership Application Instructions

**CONGRATULATIONS ON DOWNLOADING YOUR *DAI MEMBERSHIP APPLICATION FORM!***

We know this is a big step for any doula in Ireland and we hope to make the process as smooth as possible. If at any point you have questions or concerns, feel free to reach out to our Membership Secretary at [membership@doula.ie](mailto:membership@doula.ie)

You will need the following in order to complete the application:

- Photo ID
- Doula Training Certificate/s
- 2 Professional References

## STEP-BY-STEP:

1. Complete the form in its entirety
2. Carefully read, then sign and date the Code of Ethics
3. Read and sign our Data Protection policy
4. Attach a copy of your photo ID
5. Attach a copy of your Doula Training certificate/s
6. Attach (or copy and paste into the form) testimonials from 2 references —it's simple: references are expected to submit one or two short paragraphs that tell us a bit about how they know you and include a brief description of your professional character and vocation for doula work

Once completed, the application must be emailed to:

[membership@doula.ie](mailto:membership@doula.ie)

## NEXT STEPS:

- Once submitted, the committee will review your application and send you a response.
- If accepted, you will receive further instructions for membership payment (€55/year), info on our Garda Vetting process, and an additional form for your DAI online profile.
- Then your membership is made official! You will receive a Welcome Pack containing all the essential info to get you started and invitations to join our social media channels to get you connected!

**Good luck!**



# Membership Application Form

*\*Denotes mandatory fields.*

**First Name\*:**

**Surname\*:**

**Phone Number\*:**

**Email Address\*:**

**Mailing Address\*:**

**Website address:**

**I am professionally trained as\* (select all that apply):**

Birth Doula

Fertility Doula

Postpartum Doula

Menopause Doula

Abortion Doula

End of Life Doula

Other (please specify):

**Training Body/ies\* (select all that apply):**

BirthBliss Academy

The Elbowroom Birth Doula Training

DONA International

The Krysia Lynch Doula Training

DoulaCare Ireland

ProDoula

Other approved training (please specify):

The training I attended has not yet been approved by the DAI and I am attaching the coursework syllabus to my application for review by the Executive Committee.

*For a comprehensive list of all approved training bodies, please refer to our website [Doula.ie](http://Doula.ie).  
Alternatively, you may contact the membership secretary at [membership@doula.ie](mailto:membership@doula.ie)*

**For how long have you worked as a doula\*?**

Less than 1 year

Between 1 and 3 years

Between 3 and 6 years

More than 6 years

**How many clients have you had\*?**

None

Between 1 and 5

Between 5 and 10

More than 10

**Professional References\*:**

Please copy and paste below (or attach) testimonials from 2 professional references.

*Please note: One or two short paragraphs will suffice but at least one of your references must be from within the birth industry (DAI member, midwife, Cuidiu member, Lactation Consultant...)*

**Please tell us a bit about how/why you became a doula\*.**

**Please tell us about any other professional qualifications/interests you have that may be complementary to your doula work\*.**

**Garda Vetting\*** *(please select one):*

I am currently garda Vetted to work as a doula and hereby commit to keeping vetting up to date. *(Please attach Certificate to this application)*

I will complete the Garda Vetting process upon joining the DAI and hereby commit to keeping it up to date. *(This incurs an additional charge of €15).*

**Code of Ethics\*:**

I have read the Code of Ethics and hereby commit to incorporating it into my professional practices and conduct.

**Personal Indemnity Insurance Policy\*:**

I understand the DAI requires all members to have an active insurance policy at all times when working as a doula. I hereby commit to complying with this requirement.

**Is there anything else you would like to share with us?**

**By signing this document, I certify that the information contained in this form is true to the best of my knowledge.**

**Date:**

**Signature:**

*(By typing my name in the above box, I officially sign this document and understand it constitutes a legal representation of my signature)*

# Code of Ethics

The Doula Association of Ireland understands that one of the most basic and important needs of the birthing person and new families is to feel safe and secure, and to have trust and confidence in the people around them at this most wondrous time such as the welcoming of a new baby. The Association also strives to promote a respectful, positive working relationship with the midwifery and medical communities. Each member of the Doula Association of Ireland must therefore sign a written commitment to adhere to our Code of Ethics which states the basic responsibilities of our members in their working practice.

## The members of the Doula Association of Ireland:

- Understand that each individual doula is ultimately accountable for their own practice and free to conduct their business in whatever manner they see fit, always considering that the safety and welfare of doula and clients are of primary importance.
- Offer emotional, educational, practical, and physical support, assisting clients in exploring available options and making their own decisions, and refrain from offering medical advice.
- Do not advocate or speak on behalf of clients, but may encourage client to self-advocate where needed, working to enhance their communication with medical staff. It is the philosophy of the DAI that informed decision-making is key to lasting satisfaction and a positive birthing experience.
- Accept that the DAI is an inclusive organisation, upholding values that respect gender, cultural, racial, and political diversity, and basic human rights that are accessible to all, including those to bodily autonomy and integrity, as well as informed choice-making, consent, and refusal.
- Do not perform clinical or medical tasks, diagnose medical conditions, or give medical advice.
- Work to provide the highest level of care and support to their clients.
- Will refer clients to other appropriate resources/professionals should the client have needs beyond the scope of the doula role.
- Will accurately represent their training and experience and will not mislead other doulas, clients, or other birth professionals as to their level of education or experience.
- Will be honest and always show integrity and respect towards their clients, doula colleagues, and other professionals alongside whom they may be working.
- Will strive to develop and maintain positive work relationships within the doula and birthing community. As a representative of the DAI, all communications with the birthing community should be ethical and respectful.
- Will not discuss personal and confidential information which has been disclosed to them by their clients in the course of their work with them, without the express permission of those clients.
- Will not discuss personal and/or DAI communications outside the DAI without prior consent from relevant parties.
- Are advised to have a written contract with their clients.
- Will keep records of their doula activities and submit their anonymous Data Collection Forms to the Association.
- Will continue to develop their skills and education by attending relevant courses, workshops, and lectures as they become available.
- Will strive to stay up to date on evidence-based information and best practices.

As a member of the Doula Association of Ireland, I commit to upholding the stated standards and incorporating this Code of Ethics into my professional practice.

**Date:**

**Signature:**

*(By typing my name in the above box, I officially sign this document and understand it constitutes a legal representation of my signature)*

# Personal and Business Data Processing

I hereby consent to the following: that the Doula Association of Ireland can process my personal and business data for the purpose of my membership management and furthering the purpose of my membership. I understand that I am free to withdraw my permission for any or all of the above at any given time and will give notice of this in writing submitted to the Doula Association of Ireland via [chair@doula.ie](mailto:chair@doula.ie).

I consent to the Doula Association of Ireland storing all information shared with them by me, including the following:

- Garda vetting certificate
- Doula training certification
- Any additional training certifications
- Completed membership forms

I consent to receiving email, phone, and social media contact from the Doula Association of Ireland in relation to:

- My membership
- Potential work opportunities

I agree to the following:

- I consent to the Doula Association of Ireland storing the information I have provided them with in a password-protected location which is accessible to members of the Executive Committee.
- I consent to the Executive Committee sharing this information with future committee members in order to properly manage my membership.

I further understand that the information I have provided to the Doula Association of Ireland will NOT be shared with third parties without my prior consent.

**Date:**

**Signature:**

*(By typing my name in the above box, I officially sign this document and understand it constitutes a legal representation of my signature)*