



## APPLICATION FOR MEMBERSHIP

**PROFESSIONAL BUSINESS MEMBER  
PROFESSIONAL BUSINESS MEMBER  
AT LARGE  
ASSOCIATE MEMBER**

### **MEMBERSHIP TYPES AND ELIGIBILITY CRITERIA:**

**Professional Business Member**\* Works full time as a piercer and has more than one year of professional experience. Must meet both personal and environmental membership criteria .

**Professional Member at Large**\* An existing professional business member who is piercing temporarily or periodically at one or more studios that meet environmental criteria OR a previous professional business member who is still contributing to the piercing industry although they are no longer piercing. This type of membership and its limitations will be at the discretion of the board.

**Associate Member**\* Has less than one year of professional experience, or is a non-piercer working in a piercing establishment. If working as a piercer, personal and environmental criteria must be met. If working as a non-piercer, environmental criteria must be met. Associate membership will be valid only in a studio currently employing at least one professional business member.

**Corporate Associate Member** An entity or individual working in a field or providing a service that is associated with the application of body piercing. Examples of Corporate Associate Members are jewelry manufacturers, medical suppliers, insurers, educators, etc. Applicants must contact the current Secretary for a list of criteria.

**Patron Member** An individual who supports the APP and its goals but is not actively involved in the body piercing industry. This membership may not be used for the promotion of any form of piercing services, jewelry sales or web services. Dues are the only requirement for this membership.

**\*International Member** A subdivision of memberships for piercers or non-piercers working in the piercing industry outside of the United States of America. International personal criteria differs slightly from the standard to accommodate for classes and training available , among other continental differences.

#### **MEMBERSHIP DUES:**

Professional Business Member & Professional Member At Large	\$150.00 (\$50.00 annual renewal)
Associate Member	\$100.00 (\$50.00 annual renewal)
Corporate Associate Member	\$200.00 (\$200.00 annual renewal)
Patron	\$50.00 (\$50.00 annual renewal)

Dues are billed upon acceptance. DO NOT SEND them with your application; DO SEND a non-refundable \$25.00 processing fee per video. One video is required per studio.

For the current address for application processing, the Secretary can be reached at [secretary@safepiercing.org](mailto:secretary@safepiercing.org), or call 1-888-888-1APP

PLEASE ALLOW 6-8 WEEKS FOR PROCESSING

**Type of APP Membership desired (please check one):**

- Professional Business Member
- Professional Business Member at Large
- Associate Member – Piercer
- Associate Member- Non Piercer

Name of Applicant \_\_\_\_\_

Studio & Address \_\_\_\_\_

City \_\_\_\_\_ Country \_\_\_\_\_

Studio Phone \_\_\_\_\_ Fax \_\_\_\_\_

Home Address \_\_\_\_\_

Phone \_\_\_\_\_ Website \_\_\_\_\_

Yes No Would you like your email address on our website? Email \_\_\_\_\_

**THE FOLLOWING PERSONAL CRITERIA MUST BE INCLUDED FOR EACH PIERCER APPLYING:**

- A completed copy of this application form.
- A completed questionnaire, preferably typewritten.
- A copy of current CPR certification or equivalent training.
- A copy of current First Aid certification or equivalent training.
- A copy of current Bloodborne Pathogen Training Certificate or equivalent training (to be renewed annually regardless of expiration date).
- Signed Health and Safety Agreement.
- Signed Logo Usage Agreement
- Proof of how long piercer has been piercing professionally. A notarized statement,\* dated business document, or newspaper article are examples of appropriate proof.

\*If a notarized statement is submitted as proof, it must come from a party other than the applicant.

**THE FOLLOWING ENVIRONMENTAL CRITERIA MUST BE INCLUDED UNLESS ENVIRONMENTAL CRITERIA HAS BEEN SUBMITTED WITHIN THE LAST YEAR\*\*:**

- A walk through 360 degree video of applicant's entire studio including store front, foyer, piercing room(s), biohazard area, sterilization area, restroom, inside all drawers, closets, and all other spaces. Narration is appreciated.
- \$25 processing fee per video. One video is required per studio. VHS or DVD (region 1) are the preferred video formats. Other video formats may require additional time to process and any fees incurred for video transferring will be charged to applicants. Please contact the current Secretary for more information.
- Photograph of all applicant's autoclaves with make, model and serial number printed on the back of photo. Autoclaves should be medical grade with a dry cycle.
- Copy of two most recent spore test results from all autoclaves in use.
- Copies of all release forms in use at applicant's studio.
- Copies of all aftercare information distributed at applicant's studio.
- Copy of studio's business license.
- Business card.
- One or more samples of applicant's advertising.

\*\*Any and all materials should be updated voluntarily by the member if significant changes are made in the environment, advertising, equipment, aftercare etc. These updates to the member's file should be done at the time any changes are made.

As an Applicant to the Association of Professional Piercers (APP), I understand that my video tape (and other materials) becomes the property of the APP. I hereby release the APP and/or its legal representatives and assigns, the irrevocable and unrestricted right to use these materials for education, training, and for any other purpose and in any manner and medium. I hereby release the APP and its legal representatives and assigns from all claims and liability relating to said tapes and materials.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

By my signature above I certify that I have read and I agree to the terms of this application.

# **“WALK THROUGH 360° VIDEO” CRITERIA**

Revised 03/2005

The purpose of submitting a walk through 360° video with your membership application is to help us determine the level of health and safety awareness in your studio. We look for the criteria on this list, and also note anything that may be a potential hazard to clients or staff. Items that are required for membership have been labeled as such. Other items are strong suggestions that are not required for membership of themselves, however the studio that lacks several of these may not be operating at the level that is desired of APP members.

## **FRONT COUNTER/DISPLAY AREA**

- REQUIRED FOR MEMBERSHIP: The counter surface should be glass, metal, or other non-porous surface that can be disinfected several times each day.
- Gloves and disposable products to prevent cross-contamination should be kept at the front counter area.

## **BIOHAZARD/STERILIZATION ROOM(S)**

- REQUIRED FOR MEMBERSHIP: A completely separate and enclosed biohazard room for processing used implements, jewelry and supplies is crucial to your health and safety and that of your clients.
- REQUIRED FOR MEMBERSHIP: All flooring in the piercing room/s and biohazard room must be non-porous and easily disinfected.
- REQUIRED FOR MEMBERSHIP: There must be clear delineation between clean and dirty areas. Biohazard areas should be labeled as such. The ultrasonic unit and the sink used for rinsing contaminated tools should be positioned as far away from sterilizer as possible to reduce the risk of contaminating freshly autoclaved items. If space is a problem, one solution would be to install a Plexiglas barrier to divide clean and dirty areas.
- There should be at a minimum one ultrasonic cleaner to process contaminated items. Failure to remove debris from instruments or jewelry prior to sterilization can negatively affect the efficacy of the autoclave. The Center for Disease Control considers manual scrubbing of instruments to be an act that will actually increase the likelihood of exposure, due to pathogens on the equipment becoming airborne. Many studios have a second ultrasonic cleaning unit used only to process new jewelry.
- An air purifier or separate ventilation for this space is strongly suggested.
- Hand washing should never take place at the contaminated sink.

## **PUBLIC/EMPLOYEE RESTROOM**

- REQUIRED FOR MEMBERSHIP: No sterilization equipment may be housed in the public restroom.
- The restroom used by employees should have liquid soap in a pump or wall-mounted dispenser and a paper towel dispenser with easy, one-handed access.

## **PIERCING ROOM**

- ❑ **REQUIRED FOR MEMBERSHIP:** A completely separate enclosed piercing room with walls and door(s) is a required. No other services such as tattooing, hair styling, or retail sales should take place within this room.
- ❑ **REQUIRED FOR MEMBERSHIP:** All flooring in the piercing room/s must be non-porous and easily disinfected.
- ❑ **REQUIRED FOR MEMBERSHIP:** All surfaces in the piercing room that could potentially be contaminated during a procedure must be non-porous to allow for proper cleaning. This includes piercing table, mat and base, shelving, and counters.
- ❑ **REQUIRED FOR MEMBERSHIP:** Pre-sterilized piercing implements should be kept in enclosed and non-porous containers, drawers or cabinets.
- ❑ It is strongly suggested that there be clearly visible delineation between clean and dirty areas. The Sharps container and contaminated-tools tray should not be close to sterilized piercing implements and supplies. One solution would be to install a labeled biohazard shelf above the trashcan for the contaminated materials, thereby establishing a single contamination area in the room.
- ❑ Used piercing implements should be kept in a lidded, non-porous tray or container that is marked “Biohazard”.
- ❑ The Sharps container should be secure to avoid accidental spillage. In the United States, NIOSH suggests that the Sharps container be mounted with the opening 56” from the floor and OSHA requires that operators have reasonable access to it. Additionally, the Sharps container should be located such that it can be easily utilized by the piercer in all phases of a procedure without putting clients or observers at risk.
- ❑ All biohazardous waste containers should be marked as Biohazard, be lidded and have foot operation. It is appropriate to label your other lidded trashcans “Do Not Touch”. These should be placed in low or no traffic areas to avoid accidental exposure.
- ❑ A HEPA air filter or other air purification system located in the piercing room is extremely beneficial, especially if other services are offered within the studio.
- ❑ As many surfaces as possible in the piercing room should be non-porous. All pictures, posters, and wall hangings should be framed.
- ❑ As many products as possible should be sterile and single use. This includes the marking implement.
- ❑ All packaged equipment, sundry jars, or other materials and equipment used during a piercing should be handled only with clean freshly gloved hands.

## **EMPLOYEE HAND-WASHING AREA**

- ❑ **REQUIRED FOR MEMBERSHIP:** Reasonable access to a sink used for hand-washing is mandatory. In-room prep sinks are preferable.
- ❑ Optimally, the sink used for pre and post-piercing hand-washing should operate via a hands-free method.

Wall-mounted or pump liquid soap dispensers and paper towel dispensers should have easy, one-handed access. This will greatly reduce the likelihood of cross-contamination.