

2nd Floor, America House 2 America Square London EC3N 2LU Tel: 020 7014 9955 Fax: 020 7014 9977 Email: membership@ukcp.org.uk www.psychotherapy.org.uk

Application for affiliate membership of UKCP

# Non-Clinical Affiliate 2018–2019

This is an application for non-clinical membership of UKCP as an affiliate member.

This type of membership allows anyone with a professional or educational interest in psychotherapy or psychotherapeutic counselling the appropriate benefits to support their interest.

This type of membership does not include any voting rights and does not imply any form of registration or qualification with UKCP. Affiliate members must never describe their affiliation with UKCP in a way that is misleading or ambiguous on this point.

#### Terms and Conditions

In order to become a non-clinical member of UKCP an individual needs to satisfy the following conditions:

- have an interest in psychotherapy or psychotherapeutic counselling and wish to support UKCP; and
- confirm that you are not currently engaged in clinical practice within psychotherapy or psychotherapeutic counselling
- have paid the annual subscription fee.

In addition, UKCP non-clinical members:

- cannot claim to be a registered member of UKCP or imply any kind of accreditation by UKCP.
- must inform UKCP of any information that is material to the individual's terms of nonclinical membership.

UKCP affiliate members are not entitled to vote at any UKCP elections.

UKCP will not have regulatory responsibilities for its individual non-clinical members



# Application form

## Personal details

First name			
Surname			
Title			
Address (confidential)			
Town			
County			
Post code			
Telephone			
Email			
Date of birth			
Gender			
Data Protection			
	ble this he Euro nandled ail addr	to take place. This may include pean Economic Area (EEA). However, we	
<ul> <li>I confirm that the information given o relevant information could result in my</li> </ul>		orm is correct and that failure to disclose ership being withdrawn.	
<ul> <li>I understand that in pursuit of the properties of profession of psychotherapy, UKCP will provided in accordance with their policies</li> <li>I declare that all the information provided</li> </ul>	l hold ar es and p	nd process the information that I have rocedures.	
Mailing preferences			
Please tick a box to update your mailing pro	eferenc	es:	
Event advertising		E-Bulletin	
The Psychotherapist		Digital version of Psychotherapist Email	
Post except Psychotherapist & essential		excluding essential membership	

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Name (capitals)				
Signed	Date	/	/	
Membership number (UKCP use only)				

#### Payment by Direct Debit

The annual fee for UKCP affiliate membership is £62. Each year all UKCP members renew at the same time in October. This means for those whose form is received in November will be asked to pay for 11 months, those in December for 10 months and so on. Please see below table to see the fee you will be required to pay.

All affiliate grade memberships must have a direct debit set up, please fill in the form on the following page and return with your completed application form.

Portion of Year	Membership Fee
12/12ths	£62.00
11/12ths	£56.83
10/12ths	£51.67
9/12ths	£46.50
8/12ths	£41.33
7/12ths	£36.17
6/12ths	£31.00
5/12ths	£25.83
4/12ths	£20.67
15/12ths	TBC
14/12ths	TBC
13/12ths	TBC
	12/12ths 11/12ths 10/12ths 9/12ths 9/12ths 8/12ths 7/12ths 6/12ths 5/12ths 4/12ths 15/12ths 14/12ths

We will confirm the correct amount to you before payment is taken.

### Completion of application

Please complete your Direct Debit details in the form overleaf and return it with your completed application to:

UK Council for Psychotherapy 2nd Floor, America House 2 America Square London EC3N 2LU





Instruction to your

bank or building society to pay by Direct Debit

#### **UK Council Psychotherapy**

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(UKCP) America House	8	-				
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London	Account Holder(s) Name & Address:			coc actano		
EC3N 2LU				84		
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Name and full postal address of your Bank or Building Society						GC re United Kingdom Council for electronically to my bank/building
To: The Manager Bank/Building Society	society.		-,,		. ,	g
Address	Signatu	re(s)				
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Postcode	Date					
Reference	di ili					

Banks and Building Societies may not accept Direct Debit instructions for some types of account

This guarantee should be detached and retained by the Payer

#### The Direct Debit Guarantee



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits
- If there are any changes to the amount, date or frequency of your Direct Debit GC re United Kingdom Council for Psychotherapy will notify you 3 working days in advance of your account being debited or as otherwise agreed. If you request GC re United Kingdom Council for Psychotherapy to collect a payment, confirmation of the amount and date will be given to you at the time of the request
- If an error is made in the payment of your Direct Debit, by GC re United Kingdom Council for Psychotherapy or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society
- If you receive a refund you are not entitled to, you must pay it back when GC re United Kingdom Council for Psychotherapy asks you to
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.