

**REGISTRATION COUNCIL FOR
CLINICAL PHYSIOLOGISTS**

RENEWAL FORM 2008 - 2009

MUST BE RECEIVED BY 19 MAY 2008

Name: _____ RCCP Registration No: _____

Address *to appear in the public domain*

Email: _____

I wish to renew my registration with the RCCP for the period covering 1 May 2008 – 30 April 2009:
YES/NO

Please provide details of any changes below (please ensure copies of certificates are enclosed for any new qualifications you may wish to add as we are unable to make any changes without supporting evidence)

.....
.....

Declaration:

I agree to be bound by the terms of the Council's constitution, disciplinary code and codes of conduct.

Signature _____ Date _____

Renewal will only be available through direct debit payments. If this causes you any problems please contact RCCP Admin on: 0845 226 3064

I enclose a completed direct debit mandate form for this year's subscription of £20.00 *please tick*

A charge of £5 will be levied for all incomplete declaration forms that need to be returned for completion e.g. unsigned forms.

A charge of £5 will be levied for late renewals.

A charge of £5 will be levied for payments referred back to RCCP.

Please return completed direct debit mandate and declaration form to:

**RCCP Renewal Administration
Suite 4, Sovereign House
22 Gate Lane
Boldmere,
B73 5TT**

Can fax to: 0121 355 2420