

Request to Register

Application to Register with the Complementary & Natural Healthcare Council (CNHC)

Name of Professional Association (PA)	
PA Membership Number (if applicable)	
Email Address	
Date of Birth	
I give permission for you to check my details and then confirm that I am eligible for CNHC registration in the following discipline(s) (<i>please tick</i>): Hypnotherapy	
Name	
Signature	

Please return your completed Request to Register form direct to your Professional Association.

As soon as your Professional Association has provided your details to us you will be sent an automated email from the CNHC inviting you to complete your registration online.

The CNHC registration fee is £60 for your first discipline.

Each additional discipline costs £10 up to your 4th discipline, after which there is no fee for additional disciplines.

If you do not have an email address you can apply offline. Once your Professional Association has verified your application CNHC will send you postal information to complete and return to them to process. Please be advised that there will be a £10 administration fee for those who wish to apply offline as we will need to manually process your application. You will then receive a hard copy registration certificate via post.

CNHC: Tel: 020 3178 2199 / Email: info@cnhc.org.uk / Website: www.cnhc.org.uk