



Creative Kinesiology Association



Application Form for Membership: September 2017-18

	Details	Published on website Yes / No
Name		
Home Address		
Clinic Area / Address/s		
Email:		
Website:		
Home Phone:		
Mobile:		

CK Association Membership Fees

Please indicate which membership you would like and your payment option: a) full fee or b) 4 payments payable by STO (incs £5 admin fee). Fees are reduced if you are also a member of the Kinesiology Federation.

Payments for ACKRP & CKRP categories include the £30 fee for individual membership of the BCMA, which we pass on to them with your registration / renewal details. Other categories of CK Association member are affiliated to the BCMA through our Association membership.

Payment: please make cheques payable to 'Creative Kinesiology Ltd' and mark bank transfers & STOs with your name as a reference to:

Bank: The Co-Operative Bank
Account Name: Creative Kinesiology Ltd
Sort Code: 08-92-99
Account Number: 65411854

CK Association membership	BCMA individual member	Annual fee for CKA only	Annual fee for KF members (reduced CKA fee)
ACKRP: Advanced Creative Kinesiology Registered Practitioner	Yes	£100 inc £30 BCMA membership a) £100 full fee or b) £105 total 4 Payments: £60 followed by £15 x 3 payments: 1.12.17; 1.3.18 & 1.6.18	£75 inc £30 BCMA membership a) £75 full fee or b) £80 total 4 Payments: £50 followed by £10 x 3 payments: 1.12.17; 1.3.18 & 1.6.18
CKRP: Creative Kinesiology Registered Practitioner	Yes	£100 inc £30 BCMA membership a) £100 full fee or b) £105 total 4 payments: £60 followed by £15 x 3 payments: 1.12.17; 1.3.18 & 1.6.18	£75 inc £30 BCMA membership a) £75 full fee or b) £80 total 4 payments: £50 followed by £10 x 3 payments: 1.12.17; 1.3.18 & 1.6.18
CKAP: Creative Kinesiology Assessed Practitioner	No	£50 a) £50 full fee or b) £55 total 4 payments: £25 followed by £10 x 3: 1.12.17; 1.3.18 & 1.6.18	£30 a) £30 full fee or b) £35 total 3 payments: £15 followed by £10 x 2: 1.12.17 & 1.3.18
CKA Student: Creative Kinesiology Association Student	No	£30 a) £30 full fee or b) £35 total 3 payments: £15 followed by £10 x 2: 1.12.17 & 1.3.18	£20 full fee - single payment
CKA Friend:	No	£10 - single payment	

Kinesiology & Other Qualifications - for new applicants only or for any renewal changes

Please list the qualifications, both kinesiology and others that you would like to include on your CK Association website page and BCMA listing (for Registered Practitioners only). Please use additional sheet if required. You will need to attach copies of your certificates to this application and include them on your insurance cover.

Qualification & Awarding Body / School of Training	Certification Date	Copy of Certificate attached

CK Association Annual Mentoring, Personal Sessions & CPD Requirements for 2016-17 and 2017-18 (see CPD sheet)

Category	Personal Sessions	Mentoring Sessions	CPD requirements
ACKRP	At personal discretion (Can also be counted as CPD)	Minimum 4 (Can also be counted as CPD)	20 hours (Can include personal and mentoring sessions up to 10 hours)
CKRP	Minimum 4 for 1 st 3 years, then at personal discretion (Can also be counted as CPD) (Min 2 when offering less than 10 client sessions/month)	Minimum 4 (Can also be counted as CPD) (Min 2 when offering less than 10 client sessions / month)	20 hours (Can include personal and mentoring sessions up to 10 hours)
CKAP	Minimum 4	Minimum 4	n/a
CK Student	Outlined in training prospectus	Included in training	n /a
CK Friend	n/a	n/a	n/a

Personal Biography and Photos

Please email your personal biography and up to 3 photos (as jpegs) to Ali Ashby at admin@creativekinesiology.org for inclusion on the CK website.

BCMA listings

ACKRP & CKRP practitioners - your contact details and therapies will also be listed on the practitioner listing on BCMA website with a link to your email address.

Public Indemnity Insurance

I, the undersigned, understand that it is my responsibility to carry ongoing public liability and personal indemnity insurance for a minimum of £1,000,000 (one million pounds). I confirm that I am aware of no claims, suits or any circumstances, which could reasonably lead to a claim being made, or action initiated against me.

Do you have any unspent criminal convictions? yes no

If yes, please give a brief description (and attach further details if necessary):

I am currently insured with:

(Please include a copy of your insurance certificate)

Signed: _____ Date: _____

Data Protection

Creative Kinesiology Ltd is registered under the Data Protection Act. We confirm that we will not give your details to any external mailing lists. Please can you confirm that you wish to continue receiving the CK newsletter by email:

yes no

Payment

I am paying (please tick): in full in installments

I enclose a cheque for £ _____ / have paid £ _____ by bank transfer on date: _____

(your receipt will be emailed to you)

I confirm that the information provided is correct and that I:

- Have attached the relevant certificates for qualifications set out on page 2 (for new applications or changes to existing membership)
- Have attached any relevant certificates / proof of attendance for CPD
- Have signed the insurance declaration
- Have enclosed a copy of my insurance certificate
- Will abide by the BCMA Code of Conduct - and the Codes of Conduct for any other therapies that I am insured to practice

Signed: _____

Date: _____

Please return this form to:
Ali Ashby, 17 Cedars Road, Exeter EX2 4NA

admin@creativekinesiology.org

Additional information if required: