

# BACP membership application form

For BACP use only:

Category:

To avoid unnecessary duplication of your records, please complete the following.

If you have had any previous membership of, or correspondence with BACP, please provide previous membership/reference number if known:

**Application form valid from:**  
1 April 2024 to 31 March 2025

## Application guidance

The following information is designed to make the application process as straightforward as possible. Please read the guidance notes before completing the form, referring to the relevant sections for assistance.

### Please note:

- All documents once verified and scanned will be confidentially shredded.
- All signatures on this form must be original, i.e. not scanned or computer generated.

**For students applying for membership** please complete all sections except 3b.

**For qualified members applying for Individual membership,** please complete all sections except 3a.

### Important information

Please allow up to 28 working days for the processing of your membership application. The length of time to process your

application could be longer where a declaration is made under section 4. An administration charge of £20 will be deducted from any refund if an application is withdrawn and no error occurred on the part of BACP. In the event of any balances over the £20 administration charge not claimed by the applicant within one year, BACP will write off the unclaimed amount as donations. If, however, the applicant subsequently decides to reapply, BACP will reinstate the original payment and this can be used against the new subscription.

To ensure that BACP maintains its high standard of membership, all membership applications are subject to our checking procedure. This will ensure that BACP meets its quality standards for membership and that a high standard is maintained within the counselling and psychotherapy profession.

### Subscription dates

Your membership subscription will run for 12 months from the date that your membership is finalised. A renewal notice will be issued in advance of your subscription expiry date.

## Section

# 1

## Your personal details

**Please complete all of this section,** putting N/A if any part does not apply to you. For 'Other title' i.e. Dr, Rev, Sir, you must enclose evidence of your entitlement to use the title. Please provide the first name/s and surname you are legally known as.

Title: Mr Mx Mrs Miss Ms. Other title\*

\* see guidance notes

Surname

First name/s

Date of birth

Any other names you are currently known by

**Note:** If you are not known by any other names please put N/A and do not leave blank.

Any former/maiden names

**Note:** If you do not have any former/maiden names please put N/A and do not leave blank.

## Your address details

Please provide your contact details in full.

**Note:** As verification of your address please enclose a copy of official correspondence showing your name and current address, dated within the last six months, for example a utility bill or bank statement.

Postcode

Address line 1

Address line 2

Address line 3

Town

County

Country

*Email (An active email address is mandatory to process your application.)*

Telephone

Mobile

Website

*(We may check your website for regulatory purposes and to ensure adherence to our policies and protocols.)*

## Membership categories

**Please complete either section 3a or 3b** depending on which category of membership you are applying for.

From September 2021, we've updated our requirements for membership to align with changes to how training and placements are delivered remotely.

For more information on these changes please see our website:

[www.bacp.co.uk/membership/student-membership/](http://www.bacp.co.uk/membership/student-membership/)

### 3a

#### Student membership

**Please complete all parts of this section as the information requested is essential for processing your student membership.**

To apply for student membership you must be undertaking face to face classroom tuition on a minimum of a one year full time or two year part time counselling, and/or psychotherapy course that has a supervised placement with a minimum of 100 face to face client/contact hours\* as an integral part of the course.

**If you've started your course on or after 1st September 2021, at least 70% of your tuition must face to face classroom-based, with a maximum of 30% being live synchronous online training.**

\*Definition of placement

By 'integral supervised placement' we mean assessed counselling/psychotherapy work in a counselling service, with genuine clients (not other students) carried out as part of your course, under supervision, and which you're required to successfully pass in order to graduate from the course. The course must contain a minimum of 100 face to face client/contact hours to be eligible.

**If you've started your course on or after 1st September 2021, the majority (>51%) of your supervised placement must be delivered face to face. The remaining hours can be delivered online or via a combination of online and phone.**

Further details on supervised placements can be found on our website.

#### Student member details *(if applicable)*

**Note: only to be completed by those who are currently studying. If you've qualified, please complete section 3b.**

Title of course

Is the course BACP accredited?

Yes

No

Name of college or place of study

Will you complete an integral supervised placement of a minimum of 100 face to face client/contact hours as part of your course?

\*Yes

No

Did you start this course on or after 1st September 2021?

Yes

No

Expected completion date of your course?

(DD / MM / YYYY)

Length of course *(for example, one year full time or two year part time.)*

*Please attach supporting evidence from your place of study (as detailed below) to confirm your attendance, year of study and confirmation of a 100 hour integral placement.*

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# 3a

Continued

## Student Member declaration (to be completed by all applicants)

1. I declare that I'm attending face to face tuition on a minimum of one year full time or two years part time counselling/ and or psychotherapy course. If my course started on or after 1st September 2021, I confirm at least 70% of my course will be face to face classroom tuition with a maximum of 30% being live synchronous online training.
2. I declare that as an integral part of my course I'll complete a supervised placement in a counselling service with a minimum of 100 contact/client hours. If my course started on or after 1st September 2021, I confirm that the majority of client hours will be delivered face to face with remaining hours delivered online or via a combination of online and phone.

**Applicant's signature**

Date

**Note:** all signatures must be original and dated with the last twelve months of the date of receipt.

## Supporting evidence from your place of study

The letter from your place of study, must be on headed paper, be dated within the last 12 months, and be signed by either the course administrator or your tutor. Letters signed 'per pro' will not be accepted.

### The following information must be included on the letter:

- the title of the course
- the start and end dates of the course
- the year of study you're in
- that you're currently undertaking classroom tuition
- and, that a supervised placement of a minimum of 100 client/contact hours\* is an integral part of the course

# 3b

## Individual membership

### Counselling and psychotherapy qualifications

Please provide full details of your counselling and/or psychotherapy qualification. You must have completed face to face classroom tuition and successfully graduated from a minimum of a one year full time or two year part time counselling and/or psychotherapy course with an integral supervised placement with a minimum of 100 contact/client hours, or a BACP accredited course. If your results are subject to ratification you need to receive this before applying for Individual membership.

This membership category is a transitional category which allows you up to 24 months to gain Registered Member (MBACP) membership.

**Please enclose evidence of your qualification that meets the criteria. This can be either a copy of your graduation certificate or a letter from your place of study, on headed paper, which confirms you've successfully completed and graduated from the course.**

From September 2021, we've updated our requirements for membership to align with changes to how training and placements are delivered remotely.

For more information on these changes please see our website:

[www.bacp.co.uk/membership/individual-membership/](http://www.bacp.co.uk/membership/individual-membership/)

### Individual member details *(if applicable)*

**Note: only to be completed by those who've successfully completed and graduated from a course as detailed above. If you're a student please complete section 3a.**

Title of counselling/psychotherapy qualification awarded

College or place of study

Was your course BACP accredited?

Yes

No

Duration of course

*(Please tick one)*

Full-time

Part-time

I've enclosed a copy of my graduation certificate, or equivalent, from the course detailed above

### Individual Member declaration **(to be completed by all applicants)**

1. I declare that as an integral part of my course I've completed a supervised placement in a counselling service with a minimum of 100 contact/client hours. A placement is assessed counselling/psychotherapy work, with genuine clients (not other students) carried out as part of the course, under supervision, and which you were required to successfully pass in order to graduate.
2. I understand that as an Individual Member of BACP I've up to 24 months to gain Registered Member MBACP membership. I further understand that after 24 months if I haven't become Registered I won't be allowed to continue in membership, that Registration will be required before returning to membership and a fee will be applied to sit the Certificate of Proficiency.

**Applicant's signature**

Date

**Note: all signatures must be original and dated within the last twelve months of the date of receipt.**

## Disclosure

Expulsion from another professional body, having been the subject of a disciplinary review by another professional body, or having been convicted of a criminal offence is not necessarily a bar to membership of BACP. However, failure to disclose any such information, or false declarations, may result in a refusal or termination of membership.

Applications containing such declarations and/or disclosures concerning relevant health matters will be submitted to a panel for consideration under the normal procedures outlined in Article 12.2 and 12.3 of the Articles of the Association.

To assist with your application please ensure that you provide sufficient information in relation to your declaration together with any relevant documentary evidence where applicable. All declarations made may be considered by the Professional Conduct Department therefore allow sufficient time for your application and declaration to be processed.

### Disclosure

**It's important that you complete this section in full. Please note that disclosure of any information does not automatically exclude you from BACP membership.**

**However, failure to disclose such information may result in a refusal or termination of membership.**

Do you have a conviction which is not spent under the Rehabilitation of Offenders Act 1974?	Yes	No
Have you ever been struck off/ erased/ removed or suspended from membership of any professional body on register on the grounds of professional misconduct?	Yes	No
Have you ever been refused membership/ registration by a professional body or register on the grounds of professional misconduct?	Yes	No
Have you ever been the subject of any civil claim brought against you, other disciplinary action, investigation, proceeding or enquiry?	Yes	No
Are you currently or likely to be the subject of any disciplinary action, investigation, proceeding or enquiry?	Yes	No
Is your fitness to practise impaired for any reason including health or personal circumstances?	Yes	No
Are there any other factors which could call into question your suitability for membership?	Yes	No

**If you have ticked 'Yes' to any of the above, please provide a full and comprehensive signed statement including details of the circumstances surrounding the disclosure, any mitigating factors, what steps you took to turn your life around, and what you have learnt from your experiences.**

**If you have any convictions please list your unspent conviction(s) on a disclosure of criminal convictions form available to download from the membership section at [www.bacp.co.uk](http://www.bacp.co.uk) or by calling us. Under the Rehabilitation of Offenders Act 1974, certain convictions will become spent after a certain amount of time. If you have been convicted of a criminal offence you must declare your unspent convictions but do not need to declare ones that are spent. For guidance on whether or not a conviction is spent please speak to the Citizens Advice Bureau, NACRO or the relevant Government department.**

**All material information relating to your application must be disclosed. It is your responsibility to ensure that you declare all relevant information. Any information declared may be processed under Article 12.3 of the Articles of Association to determine suitability for membership of the Association.**

## Applicant's declaration and signature

Applicants must have read and understood BACP's *Ethical Framework for the Counselling Professions*. It's the responsibility of members of BACP to ensure their full understanding of the professional conduct procedure and associated protocols.

If your work involves research into counselling and psychotherapy, you are responsible for familiarising yourself with the *Ethical Guidelines for Research in the Counselling Professions*. The *Ethical Framework*, Ethical Guidelines and Membership Policies and Protocols can be found on the BACP website ([www.bacp.co.uk](http://www.bacp.co.uk)). If you can't access the document from the website a copy is available on request from Customer Services on 01455 883300.

The declaration must be signed and dated by ALL applicants. If you're unable to sign the form yourself due to a disability, please contact Customer Services.

1. I've read, understood and agree to uphold and abide by the Association's current Ethical Framework as amended from time to time. I also agree to abide by the *Ethical Guidelines for Research in the Counselling Professions* as amended from time to time, if my work involves conducting research in the field of counselling and psychotherapy. I understand that I will be subject to the Professional Conduct Procedures and the associated protocols of BACP should any complaint arise against me during my period of membership. I agree to observe the Articles of the association, regulations, and policies and procedures for the time being in force.
2. I confirm that I do not have an unspent criminal record or I attach details of unspent convictions to be taken into account in considering this application for membership.
3. I confirm that I have not been dismissed from employment for any reason, or refused or struck off/ erased/ removed or suspended from membership of a professional body/ register on any grounds, OR I attach details of matters or sanctions relating to professional misconduct to be taken into account in considering this application for membership.
4. All pending criminal, civil, financial difficulties or disciplinary actions, investigations, proceedings or enquiries are declared on an attached statement.
5. I confirm that the information contained in and attached to this form is true, accurate and complete to the best of my knowledge and belief. I hereby authorise the officers of BACP to make such enquiries as they consider necessary to verify the information given. I understand that any false or misleading statement, falsification of accompanying evidence or collusion may lead to disciplinary action being taken against me and may result in termination of my membership. I understand that failure to disclose on application or during the period of membership could lead to disciplinary action and termination of membership.
6. I understand that failure to comply with any conditions imposed on membership may result in a breach of contract which may result in termination of membership.
7. I agree that failure to renew or resignation from membership during the continuation of a professional conduct matter will not terminate or invalidate the continued processing or hearing of the matter by the Association.
8. I understand that payment of subscription does not constitute acceptance of this application to join BACP.
9. I have read and understood BACP's Privacy notice and have no objections to the way my data will be processed.
10. I understand there may be occasions when it is necessary and/or appropriate to share information about me with other regulatory/professional bodies for the purpose of regulation and in the interest of the public protection.

**Applicant's signature**

Date

**Note: your signature must be an original, signed and dated within the last twelve months of the date of receipt.**

Section

# 6

## Membership category fees

**If you're unsure about which category to apply for please contact us.**

Reduced fees are available if you're either in receipt of a state benefit or if you're unwaged with no personal income.

Tax credits, child benefit, council tax discounts/exemptions or private pensions are not acceptable as evidence for reduced fees. Acceptable state benefits include.

- Income support
- Job seekers' allowance
- Employment and support allowance
- State pension
- Personal independence payments
- Disability living allowance
- Carer's allowance
- Universal credit
- Council tax benefit (not discount)
- Housing benefit
- Bereavement allowance

If your benefit is not listed please call to check if we'll accept it.

If you're applying for the reduced fee category, you'll need to include evidence of your eligibility. This can include a copy of a letter from the benefits agency, or a photocopy of your bank statement, dated within the last 12 months showing your benefit payments (all other information can be blanked out). Alternatively, enclose a signed declaration that you're unwaged with no personal income.

Should you consider yourself to be receiving a low income and don't meet the above eligibility criteria, please see our Reduced Fee Policy on our website for details on how to submit a reduced fee request.

<https://www.bacp.co.uk/membership/membership-policies/reduced-fee-policy/>

## Membership category

**BACP membership category applied for:** *(please tick)*

Student member	Full fee £90	Reduced fee £45
Individual member	Full fee £186	Reduced fee £93

Section

# 7

## Divisions

Divisional membership is of value to anyone working with these specific fields of counselling and psychotherapy. Each interest group is profiled at [www.bacp.co.uk](http://www.bacp.co.uk) and within the application pack.

A paid for membership of a division is additional to BACP membership and entitles you to a quarterly journal, specialist resources and event discounts. Alternatively, you can add a free subscription to each BACP divisional journal, giving you access to their full journal content online.

	Annual fee	Reduced fee	Online only content
BACP Children, Young People and Families	£20	£10	£0
BACP Coaching	£20	£10	£0
BACP Healthcare	£30	£15	£0
BACP Private Practice	£20	£10	£0
BACP Spirituality	£20	£10	£0
BACP Universities & Colleges	£40	£20	£0
BACP Workplace	£30	£15	£0
CPD hub	£25	N/A	N/A

## Membership fees

### Total fees payable

Main membership	£
Divisions	£
Donation to the work BACP does	£
	<b>Total £</b>

## Method of payment

### Please choose ONE method of payment.

Payment can be made by credit/debit card or Direct Debit (annual single or 10 monthly).

From 1 June 2021, we've taken the decision to no longer accept cheque, postal order or cash as payment for membership fees.

If you prefer to pay via credit/debit card, please do not give us your card details when submitting this form. Should you select credit/debit card as a payment method below, a member of staff will contact you for payment once your application is ready to be finalised.

### Please complete the appropriate section for your method of payment.

## Method of payment

### Please select ONE payment method: *(please tick)*

- **Direct Debit (annual single)**  
(please complete and enclose the Direct Debit mandate)
- or
- **Direct Debit (10 monthly instalments)**  
(please complete and enclose the Direct Debit mandate)
- or
- **Credit/Debit card**  
(Should you wish to pay via credit/card, a member of staff will contact you for payment details once your application is ready to be finalised).

# Fair Processing Notice and checklist

## Fair Processing Notice

We're committed to complying with the GDPR and DPA 2018. The legal basis for processing the data you provide us via this form is a combination of contract and legitimate interest. Examples of why we collect this data are:

- to process your application to membership
- to carry out regulatory checks and meet our obligations to the Professional Standards Authority
- provide services to our members
- to meet our members' needs

To allow us to achieve the above, we may need to share your details with suppliers who work on our behalf. To find out more about how we use your personal data, any third parties we may share it with and your rights in relation to it, see our Privacy Notice.

## Checklist

Please use this checklist to ensure that you have completed all sections of the form correctly. Please note that any omissions may delay your membership application, as we'll need to write to you for further clarification.

### I have:

- marked section 1 '**N/A**' for other & former names (if left blank)
- enclosed **address verification**, i.e. utility bill, bank statement etc.
- completed section 3a **or** 3b and enclosed supporting evidence
- attached sufficient information and supporting evidence, where applicable, in relation to section 4
- signed and dated section 5
- attached **supporting evidence** (if required) for sections 2, 3, 6
- indicated any divisions I wish to join
- enclosed the correct **payment**

**If you've any queries regarding the application form please contact us on 01455 883300.**

### Please return the completed application to:

Membership Services  
BACP  
BACP House  
15 St John's Business Park  
Lutterworth  
Leicestershire  
LE17 4HB

# How to progress to the Registered member MBACP category

**We believe in high standards of training, robust ethics, and quality continuing professional development which we demonstrate by asking all our practising members to be on the *BACP Register of Counsellors and Psychotherapists*.**

This reflects our commitment to safeguarding clients and ensures that they have access to competent and ethical practitioners.

The clear path through our membership categories echoes your career progression and gives reassurance to clients and employers of your quality standards. Registered Member MBACP is the minimum recommended level of membership that the public should be looking for when seeking a practitioner.

When you become an Individual member we allow you up to 24 months to progress towards meeting the requirements of the Register and ultimately achieve Registered Member MBACP status.

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## How to register

Once you receive confirmation of your Individual membership you'll need to look to meet the Register requirements so that you can become a Registered Member MBACP. Please don't leave this until you have been an Individual Member for 24 months to take any action as it could take some time to complete all the steps, putting your membership at risk.

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### Step 1

There are currently two training routes available depending on where you gained your qualification.

#### **The first route:**

If you've graduated from a BACP accredited course then you're eligible to register straight away as your course will have met the training requirements.

#### **The second route:**

If you've graduated from a non BACP accredited course then all you need to do is take and pass the free Certificate of Proficiency (CoP) assessment. This is a computer based multiple choice assessment where you're presented with six case studies and are asked to make decisions on those case study clients. You'll need to book your CoP assessment as soon as possible to ensure that you have sufficient time to prepare for and take the assessment.

Visit our website [www.bacp.co.uk](http://www.bacp.co.uk) for a list of future opportunities.

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### Step 2

In addition, the BACP Register of Counsellors and Psychotherapists under the Terms and Conditions require you to:

- be in practice or have practised within the past three years
- comply with the *BACP Ethical Framework for the Counselling Professions* and any other statements issued by BACP
- abide by BACP's Professional Conduct Procedure
- ensure you have adequate, current and ongoing professional indemnity insurance to cover your area(s) of practice.
- undertake and record continuing professional development (CPD) in line with the Register's requirements
- ensure you have appropriate supervision in place
- declare any issues relating to character and fitness that may affect your practice.

Having fulfilled step one, and providing that you meet the Register requirements, you can now complete the online Terms and Conditions enabling you to progress to the Registered Member MBACP category.

It's a quick and simple online process from here which will only take 10 minutes of your time to complete.

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### Step 3

Just 24 hours after completing the Terms and Conditions you'll be able to log into your member account on our website and download your registration certificate and exclusive, personalised advertising logos.

#### **To find out more about the BACP Register**

Visit: [www.bacp.co.uk](http://www.bacp.co.uk)

Email: [bacp@bacp.co.uk](mailto:bacp@bacp.co.uk)

Call: **01455 883300**

Please keep this information to help you through the process

**This Direct Debit mandate supersedes any previously received from BACP**

## Direct Debit

**Instruction to your bank or building society to pay direct debits.**

**Please complete this form and send it to: British Association for Counselling and Psychotherapy, BACP House, 15 St John's Business Park, Lutterworth, Leicestershire LE17 4HB**

Name(s) of account holder(s)

**(UK bank accounts only)**

Bank or Building Society account number

Branch sort code

Name and full postal address of your bank/building society

Postcode

Service User Number

This is not part of the instruction to your bank or building society. Payment will be taken on or around the 25th of the due month.

**Annual DD      Ten month DD**

*Please tick your choice*

**Instruction to your bank or building society**

Please pay the British Association for Counselling & Psychotherapy direct debits from the account details in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with BACP and, if so, details will be passed electronically to my bank/building society.

Signature

Date

Membership no.

*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, the British Association for Counselling and Psychotherapy (BACP) will notify you a minimum of 14 working days in advance of your account being debited or as otherwise agreed. If you request BACP 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 BACP 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 BACP 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.