

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

Name of Professional Association

British Wheel of Yoga (BWY)

BWY Membership Number

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. If I am eligible, I give consent for you to provide my personal details to CNHC (*please tick*):

Yoga Therapy

Name

Signature

Date

Please return this completed Request to Register form direct to British Wheel of Yoga, 25 Jermyn Street, Sleaford, Lincolnshire, NG34 7RU. Email: [office@bwy.org.uk](mailto:office@bwy.org.uk)

As soon as BWY has provided your details to CNHC you will be sent an automated email from the CNHC inviting you to complete your registration and pay the CNHC registration fee online.

**The CNHC registration fee is £70 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 BWY has verified your application CNHC will send you postal information to complete and return to them to process. You will then receive a hard copy registration certificate via post.*