Please enter your personal details below in block capitals, complete the direct debit mandate and return by post to:

Registration Department HCPC Park House 184 Kennington Park Road London SE11 4BU

Name:
Address:
Phone Number:
Email Address:
HCPC Registration Number:

hcpc health & care professions council

Instruction to your bank or building society to pay by direct debit



To the manager	Bank/building society	Deference Number
Address Postcode		Instructions to your bank/building society Please pay HCPC direct debits from the account detailed in this instruction subject to the safeguards assured by the direct debit guarantee. The amounts are variable and will be debited every six months. I understand that this instruction may remain with HCPC and, if so, details
Name(s) of account holder(s)		will be passed electronically to my bank/building society. Date
Bank/building society		Signed Signed
Account number		Signed declaration Signature

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