

**1999 No. 1856**

**CHIROPRACTORS**

**The General Chiropractic Council (Registration) Rules Order  
of Council 1999**

*Made* - - - - - *10th June 1999*

*Coming into force* *15th June 1999*

At the Council Chamber, Whitehall, the 10th day of June 1999

By the Lords of Her Majesty's Most Honourable Privy Council

Whereas in pursuance of sections 3(2), 6 and 35(2) of the Chiropractors Act 1994<sup>(a)</sup> the General Chiropractic Council has made the General Chiropractic Council Registration Rules 1999 as set out in the Schedule to this Order:

And whereas by section 35(1) of the said Act such Rules shall not have effect until approved by the Privy Council:

Now, therefore, Their Lordships, having taken the said Rules into consideration, are hereby pleased to, and do hereby, approve the same.

This Order may be cited as the General Chiropractic Council (Registration) Rules Order of Council 1999 and shall come into force on 15th June 1999.

*A.K. Galloway*  
Clerk of the Privy Council

## THE GENERAL CHIROPRACTIC COUNCIL (REGISTRATION) RULES 1999

The General Chiropractic Council, in exercise of its powers under sections 3(2), 6 and 35(2) of the Chiropractors Act 1994(a), and of all other powers enabling it in that behalf, hereby makes the following Rules:–

### **Citation and commencement**

1. These Rules may be cited as the General Chiropractic Council (Registration) Rules 1999, and shall come into force on 15th June 1999.

### **Interpretation**

2.—(1) In these Rules–

“the Act” means the Chiropractors Act 1994;

“applicant” means (except in Rules 9 and 10 and paragraphs 3 to 5 of Schedule 2) a person applying for registration under Rule 4;

“registration” means registration as a registered chiropractor in the register; and

“the transitional period” means the period of two years beginning with the opening of the register.

(2) References in these Rules to a particular form is to the form appearing in Schedule 1.

(3) Two people are to be treated as related by birth or marriage for the purposes of these Rules if they are spouses of each other or if one or the spouse of one of them bears to the other or spouse of the other a relationship of lineal descendant, brother, sister, nephew, niece or first cousin; and “spouse” for this purpose includes a former spouse and an unmarried partner of the same or the opposite sex.

### **Form of register**

3.—(1) There shall be entered in the register against each registered chiropractor, in addition to his full name and the particulars required by section 6(1) of the Act, the following–

(a) the number of the certificate of registration;

(b) an indication of whether the chiropractor is male or female;

(c) the qualification of which the chiropractor is possessed which has led to his registration.

(2) The entries for registered chiropractors shall appear in the register in the alphabetical order of each chiropractor’s surname.

(3) The prescribed address to be shown in the register in respect of a chiropractor who is not practising shall be his last known place of residence.

(4) The register shall also comprise within it separate tables showing–

(a) the total number of each class of fully registered, conditionally registered and provisionally registered chiropractors appearing in the register on 1st January immediately past; and

(b) the number of persons of each class added or removed from the register in the period of twelve months ending with 1st January immediately past.

(5) Nothing in this Rule shall preclude the Registrar from entering on the register any other information which is material to a person’s registration or which is required by the Act to appear on the register.

### **Applications for registration after the transitional period**

4.—(1) An application for registration made after the transitional period shall be made to the Registrar in writing in Form A and signed by the applicant and accompanied by the fee prescribed by paragraph 1 of Schedule 2.

(2) The applicant shall provide the following in relation to any such application–

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(a) 1994 c. 17; see section 43 for the meaning of “prescribed”.

- (a) a reference as to good character from a person unrelated to the applicant by birth or marriage, being a person of good standing in the community who has known the applicant for at least four years and who is acceptable to the Registrar (including a solicitor, accountant, bank manager, Justice of the Peace, Minister of the Church, Imam, Rabbi, or similar religious official who appears to the Registrar to be appropriate);
- (b) subject to paragraph (3), a report as to the physical and mental health of the applicant meeting the requirements of that paragraph;
- (c) evidence of the applicant having a recognised qualification comprising the document conferring it or an original certificate issued by the institution granting it that it has conferred the qualification on the applicant;
- (d) so far as relevant, all the other particulars specified in form A; and
- (e) such other information or documents as the Registrar may reasonably require for the purposes of determining the application.

(3) The report given under paragraph (2)(b) shall be given by the applicant's medical practitioner, who must not be related to the applicant by birth or marriage and must have known the applicant for a period of at least four years; but if the Registrar is satisfied that because these conditions cannot be met, no such report can be given, the Registrar may satisfy himself as to the mental and physical health of the applicant (so far as he considers it necessary to do so having regard to any other information available under Rule 5(2) or examination required under Rule 5(3)) by a report given by a registered medical practitioner who, in giving the report, relies on the medical records of the applicant made by registered medical practitioners of whom the applicant was a patient (or by partners of such practitioners) for a period in aggregate of at least four years.

#### **Other conditions of registration**

5.—(1) In order to satisfy himself about the good character of the applicant, the Registrar shall take account of the reference provided under Rule 4(2)(a), any criminal offence for which the applicant has been convicted, and any other matters which appear to the Registrar to be relevant to the issue.

(2) In order to satisfy himself about the physical and mental health of the applicant, the Registrar shall take account of any report provided under Rule 4(2)(b), and any other matters which appear to the Registrar to be relevant to the issue.

(3) In satisfying himself under paragraph (1) or (2), the Registrar may if he thinks it desirable require from the applicant any information which is in addition to that required by Rule 4, and in relation to paragraph (2) may require the applicant to be examined by a registered medical practitioner nominated by the Registrar.

#### **Certificates**

6.—(1) The Registrar shall, if reasonably requested to do so, issue a certificate as to the matters mentioned in section 9(8) of the Act.

(2) The Registrar shall, upon entering any person in the register, issue to that person a certificate specifying whether he is fully, conditionally or provisionally registered and the date of registration.

#### **Amendments of register**

7.—(1) A registered chiropractor shall notify the Registrar within one month of any change of the following particulars given in respect of him in the register—

- (a) his name;
- (b) the particulars as to his address which are to be shown in the register pursuant to section 6(1)(b) of the Act;

- (c) any qualifications possessed by the chiropractor which may be material to his practice as a chiropractor.
- (2) The Registrar shall amend the register—
- (a) so far as may be necessary in consequence of any notification under paragraph (1);
  - (b) so far as may be necessary to give effect to the duty in section 7(1) or (2) of the Act;
  - (c) so far as may be necessary to give effect to a decision under section 8 of the Act;
  - (d) so far as may be necessary to give effect to any decision under section 10 of the Act;
  - (e) so far as may be necessary to give effect to any decision of a committee or court under sections 22 to 25 of the Act;
  - (f) so far as may be necessary to give effect to any decision on an appeal under sections 29 to 31 of the Act; and
  - (g) so far as may be necessary to give effect to any other information which has come to the attention of the Registrar and which in his opinion calls for such amendment in order to maintain the accuracy of the register.
- (3) Before making any amendment under paragraph (2)(a) or (g), the Registrar shall make such further enquiries and may (in a case where a duty to notify under paragraph (1) arises) require such further evidence from the chiropractor concerned, as appears to him to be necessary or appropriate.
- (4) Any notification under paragraph (1) shall be in Form B and shall be accompanied by the fee prescribed by paragraph 2 of Schedule 2.

**Retention of registration**

- 8.—**(1) Subject to the provisions of this Rule—
- (a) any registration made by the Registrar on or before 31st December 2000 shall have effect during the period beginning with the making of the relevant entry in the register and ending with 31st December 2000, and
  - (b) any registration made by the Registrar after 31st December 2000 shall have effect during the period beginning with the making of the relevant entry in the register and ending with 31st December in the year in which that entry is made.
- (2) Not later than 10th November in every year after the year 1999 the Registrar shall send to every registered chiropractor—
- (a) a form of application in Form C for the retention of the chiropractor’s name in the register;
  - (b) a notification of the fee specified in paragraph 3 of Schedule 2 (“the retention fee”); and
  - (c) a warning that unless a duly completed application in the relevant form is made, accompanied by payment of the retention fee on or before 30th November in that year, his registration will be liable to be removed from the register.
- (3) If no such application and payment as is referred to in paragraph (2)(c) is received by the Registrar by the date there mentioned, he shall send a notice of final warning to the registered chiropractor that, if no duly completed application for retention in Form C with payment of the retention fee is made before the end of the period of 14 days beginning with the day on which the notice was issued, his registration will be removed; and if no such application and payment is so made, the Registrar may remove the name of the chiropractor from the register.
- (4) No application shall be required under paragraph (2) for the retention of an entry in the register in respect of a person—
- (a) who has received a notification under section 20(9)(a) of the Act and is subject to an investigation under sections 20 and 22 to 24 of the Act in connection with which all proceedings and appeals arising have not been completed (or the time for all such appeals has not expired),
  - (b) whose registration is suspended, or
  - (c) who is not able to be sent the documents under paragraph (2) because he is first registered on or after 10th November in the year in question.

(5) Upon—

- (a) completion of any such investigation and of all proceedings and appeals arising from it, or as the case may be upon the expiry of the time for any such appeal without such appeal being made, where the decision is not one that the chiropractor's name be removed from the register or his registration suspended, or
- (b) the ending of such a suspension,

then unless there then remains less than three months in the year, the Registrar shall send to the chiropractor the documents mentioned in paragraph (2), treating the reference to 30th November in a year as a reference to the day 20 days after those matters are sent to the chiropractor, and paragraph (3) shall have effect accordingly.

(6) Any form, notification, warning or notice to be given by the Registrar under paragraph (2), (3) or (5) may be sent by post to the address of the chiropractor concerned which appears in the register pursuant to section 6(1)(b) of the Act, and shall be treated as sent or issued at the time of its posting.

### **Removal from the register**

9.—(1) Without prejudice to the power of the Registrar to remove the name of a person from the register under the Act or under Rule 8, the Registrar may remove the name of a chiropractor from the register upon written application made by or on behalf of the chiropractor stating the grounds of the application, accompanied by a statutory declaration that the applicant is not aware of any matter which could give rise to an allegation under section 20 of the Act which might lead to the removal of his name from the register.

(2) Whenever the Registrar removes the name of a chiropractor from the register under the Act or these Rules, he shall notify the chiropractor in writing of the removal and of the reasons for it.

### **Restoration of name to register**

10.—(1) The Registrar may require a person applying for restoration to the register under section 6(5) of the Act to provide all or any of the information which is to be provided in connection with an application for retention under Rule 8 of these Rules; and any application for such restoration shall be accompanied by the fee prescribed by paragraph 4 of Schedule 2.

(2) An application for registration under section 8(1) of the Act shall be accompanied by the fee prescribed by paragraph 5 of Schedule 2 and by such evidence as the applicant concerned wishes the Professional Conduct Committee to consider in determining whether to grant the application for restoration.

### **Fees: general**

11.—(1) Schedule 2 shall have effect.

(2) The Registrar may refuse to make an entry in the register, or to retain or restore such an entry, if any fee prescribed in Schedule 2 has not been paid.

Given under the common seal of the General Chiropractic Council this 27th day of May 1999



*Carla I. How*  
Member

*Susan L. Steward*  
Member

SCHEDULES

SCHEDULE 1

Rules 4(1), 7(4) and 8(2)(a)

FORMS

FORM A

GENERAL CHIROPRACTIC COUNCIL

FORM OF APPLICATION FOR REGISTRATION AFTER TRANSITIONAL PERIOD

IMPORTANT

This form must be completed in CAPITAL LETTERS and in BLACK INK.

Please read carefully the accompanying information leaflet *as you complete the form* in order to avoid mistakes which may lead to a delay in your application.

1. DETAILS OF APPLICANT

Title (Mr., Mrs., Miss, Ms or Other):

.....

Male or female: .....

Professional name: .....

Surname (if different): .....

First name: .....

Other names in full: .....

Date of birth: .....

Age on date of application: .....

Nationality: .....

Address of sole or principal practice, or address of place of residence if not in practice:

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Postcode: .....

Country: .....

Main telephone number: .....

Fax number: .....

Mobile telephone number: .....

Emergency telephone number: .....

E-mail address: .....

Address of place of residence (if not given above)

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Postcode: .....  
Country: .....

**2. CHARACTER**

Registration with the General Chiropractic Council is exempt from the Rehabilitation of Offenders Act 1974 and the Rehabilitation of Offenders (Northern Ireland) Order 1978 [S.I. 1978/1908 (N.I. 27)] under the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 [S.I. 1975/1023] and the Rehabilitation of Offenders (Exceptions) Order 1979 [S.R. 1979 No. 195].

You are obliged to disclose by virtue of the above Exception Orders *ALL* criminal convictions whether “spent” or not under the 1974 Act and its subsequent revisions. Parking and minor traffic offences only punishable by fine may be excluded.

A. Have you ever been convicted of a criminal offence? (Y/N) .....

B. If so, please give the following details–

Your name when the offence was committed: .....

Nature of the offence: .....

Country where offence committed: .....

Date of conviction: .....

Sentence (e.g. term of imprisonment, fine, probation, etc.):.....

[Please continue on a separate sheet, if necessary, in respect of every criminal offence of which you have been convicted.]

**3. HEALTH**

A. Have you ever had a medical problem, either physical or mental, which has prevented you from practising chiropractic? (Y/N) .....

B. If so, please give full details:

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**4. PROFESSIONAL EDUCATION AND QUALIFICATIONS**

A. Have you attended a chiropractic educational institution? (Y/N) .....

B. If so, please give the name of each institution which you have attended, and the dates of your attendance.

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C. On what date and at which institution did you qualify as a chiropractor?

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D. What chiropractic qualifications do you have?

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.....  
E. What *other* academic or professional qualifications do you have?  
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**5. PROFESSIONAL NEGLIGENCE**

A. Has any allegation of professional negligence in relation to your practice of chiropractic been made against you in a civil court in any country? (Y/N)  
.....

B. If so, was the allegation of negligence found to have been proved? (Y/N) .....

C. If so, please give the details of any judgement which was given against you.  
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**6. PROFESSIONAL INDEMNITY INSURANCE**

A. Are you currently protected by a policy of professional indemnity insurance? (Y/N) .....

B. Have you ever been required to pay an increased premium for such insurance? (Y/N) .....

C. Have you ever been quoted such insurance on loaded terms? (Y/N) .....

D. Have you ever been refused such insurance? (Y/N) .....

E. If you know why you were required to pay an increased premium, or why you were quoted insurance on loaded terms, or why you have been refused insurance, please give this information.  
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**7. MEMBERSHIP OF PROFESSIONAL BODIES**

A. Are you a member of any national or international chiropractic body? (Y/N) .....

B. If so, please give the name of any such body, and the period for which you have been a member.  
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C. Are you a member of any *other* professional body? (Y/N) .....

D. If so, please give the name of any such body, and the period for which you have been a member.  
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**8. PROFESSIONAL REGISTRATION AND DISCIPLINARY PROCEEDINGS**

A. Have you ever been *refused* registration as a chiropractor by any professional regulatory body in any country? (Y/N) .....

B. If so, please give details of the professional regulatory body and the reasons given for the refusal to register.  
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- .....
- C. Have you ever been *struck off* any register by a professional regulatory body? (Y/N) .....
- D. If so, please give details of the register, the reason why you were struck off, and the dates during which the striking-off was effective.
- .....
- .....
- .....

- E. Have you ever been *suspended* from practice as a chiropractor by a professional regulatory body? (Y/N) .....
- F. If so, please give details of the reason why you were suspended, and the dates during which the suspension was effective.
- .....
- .....
- .....

- G. Have there ever been any *other* disciplinary findings made against you by a professional regulatory body? (Y/N) .....
- H. If so, please give full details.
- .....
- .....

- I. Are there any unresolved complaints against you which have been made to a professional regulatory body? (Y/N) .....

- J. If so, please give the following details in respect of each complaint—  
 The professional regulatory body to which the complaint has been made:  
 .....  
 The date of the complaint: .....  
 The nature of the complaint: .....

[Please continue on a separate sheet, if necessary, in respect of each complaint which has been made against you.]

**9. FEES**

A fee of £1,250 must accompany this application unless you satisfy the Registrar that, by virtue of sickness or other reason, you do not intend to engage in the practice of chiropractic during the period up to 31st December in the year of registration, within the United Kingdom, the Channel Islands, the Isle of Man or a State within the European Economic Area, in which case the fee is £100.

If you enclose a fee of £100 because you fall within the ground mentioned above, give particulars relating to your practice as a chiropractor.

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**10. EVIDENCE OF IDENTITY**

You must supply your birth certificate (or if you were born in another jurisdiction, equivalent evidence of identity) and, if you practice in a different name from that on the certificate, other evidence of identity such as your marriage certificate and/or change of name deed. List below the documents enclosed:

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**11. OTHER DOCUMENTS ENCLOSED**

The General Chiropractic Council (Registration) Rules 1999 also require a reference as to good character and a report as to physical and mental health meeting the requirements of the Rules, and documents or original certificates conferring relevant qualifications. List below the documents enclosed:

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.....  
.....

**12. DECLARATION**

**CAUTION: Applicants are reminded that if any entry on the Register is procured fraudulently they may find themselves subject to disciplinary and criminal proceedings.**

**I declare that all information supplied by me in support of my application for registration with the General Chiropractic Council is, to the best of my knowledge and belief, true and accurate.**

**I understand that the Registrar may take steps to verify any such information supplied by me, and that such steps may include a visit to my principal practice. In the event of any such visit I agree to cooperate fully.**

**I enclose a fee of £100/£1,250 (delete as appropriate)**

**Signed:**

**Dated:**

FORM B

GENERAL CHIROPRACTIC COUNCIL

FORM OF APPLICATION FOR AMENDMENT OF THE REGISTER

IMPORTANT

This form must be completed in CAPITAL LETTERS and in BLACK INK.

Please read carefully the accompanying information leaflet *as you complete the form* in order to avoid mistakes which may lead to a delay in your application. A fee of £75 must accompany this application.

1. DETAILS OF APPLICANT

Title (Mr., Mrs., Miss, Ms):

.....

Male or female: .....

Professional name: .....

Surname (if different): .....

First name: .....

Other names in full: .....

Date of birth: .....

Age on date of application: .....

Nationality: .....

Your present address as appearing in the register of chiropractors:

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.....  
.....

Postcode: .....

Country: .....

Main telephone number: .....

Fax number: .....

Mobile telephone number: .....

Emergency telephone number: .....

E-mail address: .....

2. DETAILS OF REQUESTED AMENDMENT

Please give details of the change of name, practice address or qualifications or, if you are no longer practising, your place of residence.

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.....

3. DECLARATION

**CAUTION: Applicants are reminded that if any entry on the Register is procured fraudulently they may find themselves subject to disciplinary proceedings.**

**I declare that all information supplied by me in support of my application for amendment is, to the best of my knowledge and belief, true and accurate.**

**I understand that the Registrar may take steps to verify any such information supplied by me, and that such steps may include a visit to my principal practice. In the event of any such visit I agree to cooperate fully.**

**I enclose a fee of £75.**

**Signed:**

**Dated:**

FORM C

GENERAL CHIROPRACTIC COUNCIL

FORM OF APPLICATION FOR RETENTION ON THE REGISTER

IMPORTANT

This form must be completed in CAPITAL LETTERS and in BLACK INK.

Please read carefully the accompanying information leaflet *as you complete the form in order to avoid mistakes which may lead to a delay in your application.*

1. DETAILS OF APPLICANT

Title (Mr., Mrs., Miss, Ms): .....

Male or female: .....

Professional name: .....

Surname (if different): .....

First name: .....

Other names in full: .....

Date of birth: .....

Age on date of application: .....

Nationality: .....

Address of sole or principal practice, or address of place of residence if not in practice:

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.....  
.....

Postcode: .....

Country: .....

Main telephone number: .....

Fax number: .....

Mobile telephone number: .....

Emergency telephone number: .....

E-mail address: .....

2. ENTRY ON THE REGISTER TO BE RETAINED

Please give the following details—

A. Your registration number  
.....

B. The date on which the entry of your name on the register was first made .....

3. CRIMINAL OFFENCES

A. Have you been convicted of a criminal offence since your last application for registration or retention? (Y/N) .....

B. If so, please give the following details—  
Your name when the offence was committed: .....  
Nature of the offence: .....

Country where offence committed: .....

Date of conviction: .....

Sentence (e.g. term of imprisonment, fine, probation, etc.): .....

[Please continue on a separate sheet, if necessary, in respect of every criminal offence of which you have been convicted.]

**4. HEALTH**

A. Have you had a medical problem, either physical or mental, since your last application for registration or retention, which has prevented you from practising chiropractic? (Y/N) ...

B. If so, please give full details:

.....  
.....  
.....  
.....

**5. PROFESSIONAL NEGLIGENCE**

A. Has any allegation of professional negligence in relation to your practice of chiropractic been made against you in a civil court in any country since your last application for registration or retention? (Y/N) .....

B. Has any allegation of negligence been found to have been proved since your last application for registration or retention? (Y/N) .....

C. If so, please give the details of any judgement which was given against you.....

.....  
.....

**6. PROFESSIONAL INDEMNITY INSURANCE**

Please give the following details of your professional indemnity insurance

A. The name of your insurer .....

B. The date on which cover expires .....

C. The amount of cover provided .....

**7. MEMBERSHIP OF PROFESSIONAL BODIES**

A. Are you still a member of any national or international chiropractic body? (Y/N) .....

B. If so, please give the name of any such body, and the period for which you have been a member.

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C. Have you become a member of any *other* professional body? (Y/N) .....

D. If so, please give the name of any such body, and the period for which you have been a member.

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**8. PROFESSIONAL REGISTRATION AND DISCIPLINARY PROCEEDINGS**

A. Have you since your last application for registration or retention been *refused* registration as a chiropractor by any professional regulatory body in any country? (Y/N) .....

B. If so, please give details of the professional regulatory body and the reasons given for the refusal to register.

.....

- .....
- C. Have you since your last application for registration or retention been *struck off* any register by a professional regulatory body? (Y/N) .....
- D. If so, please give details of the register, the reason why you were struck off, and the dates during which the striking-off was effective.
- .....

- .....
- E. Have you since your last application for registration or retention been *suspended* from practice as a chiropractor by a professional regulatory body? (Y/N) .....
- F. If so, please give details of the reason why you were suspended, and the dates during which the suspension was effective.
- .....
- .....

- G. Have there since your last application for registration or retention been any *other* disciplinary findings made against you by a professional regulatory body? (Y/N) .....
- H. If so, please give full details.
- .....

- I. Are there any unresolved complaints against you which have been made to a professional regulatory body? (Y/N) .....

- J. If so, please give the following details in respect of each complaint–  
 The professional regulatory body to which the complaint has been made:  
 .....  
 The date of the complaint: .....  
 The nature of the complaint: .....

[Please continue on a separate sheet, if necessary, in respect of each complaint which has been made against you.]

**9. FEES**

A fee of £1,000 must accompany this application unless you satisfy the Registrar that, by virtue of sickness or other reason, you do not intend to engage in the practice of chiropractic next year within the United Kingdom, the Channel Islands, the Isle of Man or a State within the European Economic Area, in which case the fee is £100.

If you enclose a fee of £100 because you fall within the ground mentioned above, give particulars relating to your practice as a chiropractor.

.....

.....

.....

**10. DECLARATION**

**CAUTION: Applicants are reminded that if any entry on the Register is procured fraudulently they may find themselves subject to disciplinary and criminal proceedings.**

**I declare that all information supplied by me in support of my application for registration with the General Chiropractic Council is, to the best of my knowledge and belief, true and accurate.**

**I understand that the Registrar may take steps to verify any such information supplied by me, and that such steps may include a visit to my principal practice. In the event of any such visit I agree to cooperate fully.**

**I enclose a fee of £100/£1,000 (delete as appropriate)**

**Signed:**

**Dated:**

## FEES

1. The fee prescribed for the purposes of section 3(2)(a) of the Act (applications for registration) for any application made after the transitional period shall be—
  - (a) £100 in respect of an applicant who satisfies the Registrar that, by virtue of sickness or other reason, he does not intend to engage in the practice of chiropractic within the United Kingdom, the Channel Islands, the Isle of Man or a European Economic Area State during the period ending 31st December in the year in which he will next be required to be sent documents under Rule 8(2), or
  - (b) in any other case, £1,250.
2. The fee prescribed for the purposes of Rule 7(4) (notifications of change of particulars) shall be £75.
3. The fee prescribed for the purposes of Rule 8(2)(b) (the retention fee) shall be—
  - (a) £100 in respect of an applicant who satisfies the Registrar that, by virtue of sickness or other reason, he does not intend to engage in the practice of chiropractic within the United Kingdom, the Channel Islands, the Isle of Man or a European Economic Area State during the period of 12 months beginning on 1st January next after the year in which the notification in question under Rule 8(2)(b) is required to be sent, or
  - (b) in any other case, £1,000.
4. The fee prescribed for the purposes of section 6(5) of the Act (restoration to the register of unretained entry) shall be—
  - (c) £100 in respect of an applicant who satisfies the Registrar that, by virtue of sickness or other reason, he does not intend to engage in the practice of chiropractic within the United Kingdom, the Channel Islands, the Isle of Man or a European Economic Area State during the residue of period of 12 months beginning on 1st January next after the year in which the documents under Rule 8(2) to which he failed to respond were required to be sent, or
  - (d) in any other case, £1,250.
5. The fee prescribed for the purposes of Rule 10(2) (restoration to the register of entry struck off the register) shall be—
  - (a) £100 in respect of an applicant who satisfies the Registrar that, by virtue of sickness or other reason he does not intend to engage in the practice of chiropractic within the United Kingdom, the Channel Islands, the Isle of Man or a European Economic Area State during the period ending 31st December in the year in which the restoration would fall to be made, or
  - (b) in any other case, £1,250.
6. In this Schedule, “European Economic Area State” means a State which is a contracting party to the European Economic Area Agreement, and for this purpose the “European Economic Area Agreement” means the Agreement on the European Economic Area signed at Oporto on 2nd May 1992<sup>(a)</sup> as adjusted by the Protocol signed at Brussels on 17th March 1993<sup>(b)</sup>.

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(a) Command 203/2073 and OJ No. L1, p. 3.

(b) Command 2183 and OJ No. L1, p. 572.

## **EXPLANATORY NOTE**

*(This note is not part of the Order)*

This Order, which is made under the Chiropractors Act 1994, approves Rules made by the General Osteopathic Council prescribing the procedures for assessing persons applying to be registered as registered chiropractors.

**£3.50**

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