

DIRECTORY APPLICATION FORM: PRACTITIONERS' LIST



BAPAM provides free medical assessments and specialist referrals (including for affordable ongoing treatment) for professional, semi-professional and student performing artists with performance-related health problems. A key service is our Directory of Practitioners listing health practitioners who support BAPAM and offer their services, either free or at a reduced price.

Via our Directory (Practitioners' List) we aim to create a national network of practitioners, available to performers via the BAPAM website. In order to qualify for entry in the Directory, you will need the following:

- An appropriate professional qualification
- Registration with an appropriate accrediting body
- Professional indemnity insurance
- Interest in and prior experience of treating performing artists
- Attendance at a BAPAM Induction Day. This is offered free to Directory applicants as a way of introducing you to BAPAM's aims and operations.
- If you work in private practice, willingness to offer a reduction of at least 30% on your standard professional fees for performing artists
- Ability to demonstrate ongoing CPD training, including attendance on at least one BAPAM Training Day every two years.

Directory practitioners will receive notification of dates of BAPAM training days and medical seminars. In addition, we encourage practitioners to become Friends of BAPAM so as to be kept informed about developments in Performing Arts Medicine.

To apply to join the Directory please print off and complete the attached application form, and send it to BAPAM with the following documentation:

- A copy of your professional qualification. This must be awarded by a recognised accrediting body.
- A copy of your current professional registration certificate.
- A copy of your up-to-date professional indemnity insurance certificate.

Your application will be vetted by a member of BAPAM's Medical Committee.

To remain on the Directory, you will receive an annual request to supply an up-to-date professional registration certificate (unless this is web-based and can be checked directly by BAPAM) and your current indemnity insurance certificate, as well as evidence of appropriate professional training attended in the previous 12 months, including BAPAM training days. We will also ask you to check your current application form and update it where necessary.

<p>5. Agreement that all relevant information (name, qualifications, specialist interests, professional contact details) to be included on BAPAM website</p> <p>This will enable visitors to the website to contact you directly without going through the BAPAM office.</p>	<table border="1" style="width: 100%;"> <tr> <td style="width: 25%; text-align: center;">Yes</td> <td style="width: 25%;"></td> <td style="width: 25%; text-align: center;">No</td> <td style="width: 25%;"></td> </tr> </table> <p>If 'No', please tick your preference below:</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 75%;"> <ul style="list-style-type: none"> All information except your professional contact details to be provided on BAPAM website. Visitors to the site will have to speak to someone in the BAPAM office if they wish to contact you. </td> <td style="width: 25%;"></td> </tr> <tr> <td> <ul style="list-style-type: none"> No information about you to be placed on the BAPAM website. Information about you will only be provided to clients who contact the BAPAM office seeking information about a suitable practitioner </td> <td></td> </tr> </table>	Yes		No		<ul style="list-style-type: none"> All information except your professional contact details to be provided on BAPAM website. Visitors to the site will have to speak to someone in the BAPAM office if they wish to contact you. 		<ul style="list-style-type: none"> No information about you to be placed on the BAPAM website. Information about you will only be provided to clients who contact the BAPAM office seeking information about a suitable practitioner 	
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<p>6. Branch(es) of health-care in which you practise</p>									
<p>7. Relevant professional qualifications (with dates achieved)</p> <p>Please also enclose copy of registration certificate.</p>									
<p>8. Accrediting bodies</p>									
<p>9. Insurance company/ membership number</p> <p>Please also enclose copy of indemnity insurance certificate.</p>									

**10. Employment record
(continue on separate
page if required)**

<p>11. Reasons for wishing to work with BAPAM</p>	
<p>12. Number of years' experience treating performing artists</p> <p>Please also detail type(s) of performers seen, in what setting(s), and approximate numbers per year.</p>	
<p>13. Relevant professional development undertaken in last two years</p>	

<p>14. Most BAPAM clients have few funds and no private health insurance. It is very important that we give them full information about the terms under which you would see them as BAPAM patients.</p> <p>Please fill in the relevant sections.</p> <p>Please note that where you specify a charge, BAPAM will assume this stays unchanged for at least a year.</p> <p>BAPAM will update this information by making an annual request for details of changes.</p>	<table border="1"> <tr> <td>1. I would see BAPAM referrals free of charge</td> <td></td> </tr> </table>	1. I would see BAPAM referrals free of charge	
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<p>4. Other arrangements (please specify)</p>			

I confirm that all the above information is correct and will keep BAPAM updated with changes.

Signature.....Date.....

For office use only					
Renewal date for checking: <ul style="list-style-type: none"> • Professional registration • Professional indemnity Insurance • Charging arrangements 		BAPAM Induction Day – date of attendance		CPD Training Record – date for first check	