



THE INSTITUTION OF FIRE ENGINEERS
FOUNDED 1918 • INCORPORATED 1924



The IFE is a licensed member
of The Engineering Council

Student Membership Application Form

PLEASE CLICK GREY AREA, KEY IN INFORMATION, PRINT AND SIGN
ALTERNATIVELY, PRINT OFF THE FORM, WRITE IN BLOCK CAPITALS USING BLACK INK AND SIGN

APPLICANTS MUST BE FOLLOWING AN ONGOING PROGRAMME OF STUDY. EVIDENCE OF THE COURSE PROGRAMME MUST ACCOMPANY THIS APPLICATION. STUDENT MEMBERSHIP WILL BE VALID FOR UP TO FIVE YEARS AT WHICH POINT STUDENTS WILL BE REQUIRED TO UPGRADE THEIR MEMBERSHIP OR TRANSFER TO AFFILIATE STATUS

PERSONAL DETAILS			
SURNAME			
FIRST NAME(S)			
TITLE		DATE OF BIRTH <i>dd/mm/yy</i>	
POST NOMINALS		GENDER <i>delete as applicable</i>	MALE / FEMALE
JOB TITLE <i>if applicable</i>			
EMPLOYER <i>if applicable</i>			
CORRESPONDENCE ADDRESS			
TOWN / CITY			
POSTCODE		COUNTRY	
TELEPHONE			
MOBILE TELEPHONE			
E-MAIL			
DETAILS OF ANY PREVIOUS OR EXISTING MEMBERSHIP OF THE IFE		HAVE YOU EVER BEEN A MEMBER OF THE IFE? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, PLEASE COMPLETE THE FOLLOWING: MEMBERSHIP NUMBER <input type="text"/> GRADE <input type="text"/>	

<p>METHOD OF PAYMENT (<i>please mark one box</i>) PLEASE DO NOT SEND CASH</p> <p><input type="checkbox"/> I enclose a cheque or banker's draft in pounds sterling (GBP) made payable to the Institution of Fire Engineers</p> <p><input type="checkbox"/> I authorise you to debit the card details below</p>

✂

PAYMENT BY CREDIT OR DEBIT CARD																									
<i>(Unfortunately we are unable to accept American Express)</i>																									
Please complete the boxes within this section:																									
<table border="1"> <tr> <td>Cardholder's Name:</td> </tr> <tr> <td>Signature:</td> </tr> <tr> <td>Date:</td> </tr> </table>	Cardholder's Name:	Signature:	Date:	<p>Card number (<i>the long number on the front of your card</i>):</p> <table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> </table> <p> Issue No.: (if applicable) <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> </p> <p> Start Date: (mm / yy) <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> </p> <p> Expiry Date: (mm / yy) <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> </p> <p> Security No.: (Last 3 digits on signature strip) <input type="text"/> <input type="text"/> <input type="text"/> </p>																					
Cardholder's Name:																									
Signature:																									
Date:																									
For office use only – Student membership number / amount																									

COURSE DETAILS – REMEMBER TO ATTACH EVIDENCE OTHERWISE YOUR FORM WILL NOT BE PROCESSED			
NAME OF EDUCATION PROVIDER			
FULL NAME OF COURSE AND QUALIFICATION			
COURSE TYPE (EG F/T, P/T, SANDWICH ETC)			
START DATE		END DATE	
PLEASE DETAIL BELOW TYPE OF EVIDENCE OF COURSE / STUDY PROGRAMME YOU HAVE ATTACHED TO THIS FORM WHICH REFLECTS THE CURRENT STUDY YEAR - FOR EXAMPLE LETTER FROM YOUR EDUCATION PROVIDER, LETTER FROM YOUR EMPLOYER, COPY OF ENROLMENT LETTER:			

EMAILS – DATA PROTECTION, ONLINE JOURNAL OPTION AND APPLICANT’S STATEMENT	
EMAILS – DATA PROTECTION	
<p>The Institution of Fire Engineers (IFE) is fully registered under the UK Data Protection Act, and in accordance with this Act, the IFE (and companies processing data on its behalf) will hold and use data contained in this form for administrative purposes.</p> <p>It is the express wish of the IFE that information relating to members is available only to the IFE and not for direct access by third parties. Arrangements are occasionally made with suppliers of goods and services for their mailing to be sent to members. All material is carefully vetted and the mailing list is never released to third parties.</p> <p>If you do not want to receive mailings, please indicate your preferred option from the list below. The data recorded in this section will automatically override any previous information that the IFE has collected from you concerning data protection.</p> <p>If you do not want to receive third party mailings, please mark this box <input type="checkbox"/></p> <p>If you would prefer not to receive emails from the IFE, please mark this box <input type="checkbox"/></p>	
ONLINE JOURNAL OPTION	
<p>The IFE is keen to support the environment. Please tick this box if you are happy to receive the Fire Risk Management journal through electronic access only, ie you are happy not to receive a hard copy by post or airmail. <input type="checkbox"/></p>	
APPLICANT’S STATEMENT	
<p>I certify that all statements and answers given on this form and any attachments thereto are to the best of my knowledge true in substance and are made in good faith. I confirm that I have read the relevant sections of the IFE’s Membership Rules for Titles and Grades available at http://www.ife.org.uk/membership/howdoijoin/</p>	
SIGNATURE OF APPLICANT	DATE

Please return completed application, evidence of study and fee to:

The Membership and Registration Department, The Institution of Fire Engineers, IFE House
64-66 Cygnet Court, Timothy’s Bridge Road
Stratford-upon-Avon CV37 9NW, United Kingdom

For further information, visit www.ife.org.uk

Tel: +44 (0)1789 261463

Fax: +44 (0)1789 296426

E-mail: info@ife.org.uk