

MEMBERSHIP APPLICATION FORM

Surname		Forenames	
Home Address		Title	Mr / Mrs / Miss / Dr / Prof / Ms
	Post code	Date of Birth	
Work Address	Company Address	Email	
	Post Code	Tel no	
		Fax no	

Would you like correspondence sent to home or work address? (please tick)

Please include details of a Referee who has direct knowledge of your position and responsibilities at work. If possible a second Referee should also be included. Ideally one or both of these should be members of the Institute. Students' applications may be proposed by a college tutor or Head of Department. The Institute will make contact with the Referee named below to ask for a brief reference. See Note 1.

1st Reference


2nd Reference (optional)

Name

Address

Are you a member of the Institute?

Years known

Signature 

Name

Address

Are you a member of the Institute?

Years known

Signature

I hereby apply to join the Institute of Refrigeration for membership and understand that the grade of membership will be decided by the Council. In the event of my election I agree to conform to the By-laws of the Institute and to pay the annual subscription. I certify that the statements made by me on this form are true.

Signature

Date

For office use only
 Grade s / aff / am / m
 Membership no
 Date

EXPERIENCE

Name

Name of employer and principal activity of business (see note 2)	No. of staff	Job title or details of position held	Precise levels of responsibility in areas <i>related to refrigeration</i> and number of staff supervised.(see note 3)	Dates employed	Length of employment
Current:					

Where did you hear about the Institute?

- Recommendation by a tutor Internet Publications Attended IOR event

What has prompted you to join now?

.....

Training and Qualifications

Qualification obtained (see Note 4)	Main subjects studied	Name of Institute making the award	Dates attended/ awarded


Membership of other Organisations (eg Engineering Council)

Name of Organisation	Grade of Membership	Dates attended/ awarded

Other Relevant Information to be taken into account (eg Published material, Papers presented, Membership of Committees, Contributions to local Branches or Societies, additional responsibilities at work etc)

Direct Debit Mandate (UK residents)


Name and address of your Bank or Building Society



To The Manager _____
 _____ Bank or Building Society
 Address _____
 _____ Postcode _____

Name (s) of account holders

Branch Sort Code

Signature 

Date

Account number

IoR membership number
(to be completed by the office)

Originators Identification Number 906097

Please pay the Institute of Refrigeration Direct Debits from the account detailed on this Instruction subject to the safeguards assured by the Direct Debit Guarantee. (NB some Banks and Building Societies may not accept Direct Debit Instructions for some types of account)

Notes for completion of the Application Form

These notes provide guidance for applying for membership of the Institute of Refrigeration. Please complete the application form as fully as possible, ensuring that you state clearly your level of responsibility (eg supervisory authority and technical/commercial responsibility) and **experience in refrigeration**. Progression within different roles in one organisation should be detailed. It would be most helpful if you include a hierarchy chart showing the personnel structure of your organisation.

Your completed form will be assessed by the Membership Committee according to the Membership Criteria accompanying this form.

The membership fee for your first year will include a one-off joining fee of £20 to cover the costs of processing your application. UK members should complete the direct debit section. You will be advised of your grade of membership and your corresponding membership fee in writing when your application has been accepted by the Committee. The first year's membership fee and joining fee will be debited from your account unless we are instructed otherwise. Overseas members will be sent an invoice for the appropriate amount.

Note 1

If you do not have a Reference (eg you are self employed) please ask someone familiar with your work, such as a supervisor or client to act as a referee.

Note 2

Principal activities of the organisation in which you work should be clearly stated eg Consulting Engineers, Specialist Refrigeration and Air Conditioning Contractors, Manufacturer of Refrigeration Equipment or Products, Wholesaler, Distributor, Cold Store of Food Chain Dept, Educational Institution, Public Utility, Government Body, End User of Refrigeration.

Note 3

The degree of responsibility of your position should be stated in terms of -

- a) *Special responsibility or leadership* with responsibility for other senior staff. Relevant job titles would include Chief Executive, Managing Director, Partner, Owner, Director, Chief Engineer, Principal Lecturer.
- b) *Important responsibility or leadership*, reporting to a senior member of staff with supervisory authority over a number of junior staff. Relevant job titles would include Manager, Chief Draughtsman, Foreman, Supervisor, Section Leader, Project Engineer, Sales Engineer, Production Engineer, Plant Engineer, Lecturer, Service Engineer, Quality Assurance Inspector etc.
- c) *Some responsibility*, reporting to a Manager or equivalent with no subordinates. Relevant job titles would include Service/Installation Technician, Technical Assistant, Draughtsman, Sales Representative, Trainee, Apprenticeship, Maintenance Engineer, Student.

Note 4

Please enclose photocopies of relevant Certificates. If your qualifications were obtained overseas please state UK equivalent qualification level (eg Postgraduate, Degree, Higher National Certificate/Diploma, National Certificate/Diploma, S/NVQ or Craft Level, Apprenticeship etc)

**Please return your completed form to
The Institute of Refrigeration
Kelvin House
76 Mill Lane
Carshalton
Surrey SM5 2JR.**