



Application for concessionary membership subscription rate

For office use only

Date received:	Ackn. date:	Membership category:	Membership number:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date approved:	Reviewer:	Agreed % reduction:	E-MRM:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

PLEASE REFER TO THE GUIDANCE NOTES ON THE REVERSE OF THIS FORM BEFORE COMPLETING YOUR APPLICATION

1 Section 1 – Personal details

Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Prof <input type="checkbox"/> Other <input type="checkbox"/>										Membership number: <input type="text"/>									
Family name: <input type="text"/>										Home address: <input type="text"/>									
First names: <input type="text"/>																			
Date of birth:		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Town: <input type="text"/>									
Email: <input type="text"/>										County/State: <input type="text"/>									
Mobile: <input type="text"/>										Postcode: <input type="text"/>									
Telephone: <input type="text"/>										Country: <input type="text"/>									

2 Section 2 – Please answer the following questions

1 Do you wish to apply because you are currently unemployed?
 If your answer is 'yes' please tick (/) the box below.
 If your answer is 'no' please go to [Question 2](#).
 I am currently registered as unemployed (UK) or equivalent (outside UK) and I am not receiving any income either from an employer or from self-employment.

2 Do you wish to apply because of sickness or disability?
 If your answer is 'yes' please tick (/) the box below.
 If your answer is 'no' please go to [Question 3](#).
 I am unable to work due to a prolonged illness or disability and I am not receiving any income from a company scheme covering this period of unemployment due to illness.

3 Do you wish to apply because you are taking a career break?
 If your answer is 'yes' please tick (/) one of the boxes below.
 If your answer is 'no' please go to [Question 4](#).
 I am taking a break from my work due to:
 Maternity leave or time off to raise a family and I am not receiving any income (other than statutory maternity pay).
 I am currently in full time study and not receiving any income other than a university grant.

4 Is there another reason why you feel you may be entitled to a concessionary rate?

If your answer is 'yes' please tick (/) the box below and explain in no more than two or three of sentences the reason for your request.

5 I attach the following documentary evidence in support of my application

Evidence of unemployment

Evidence of maternity leave

A doctor's certificate

Letter from your university/course provider

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Section 4 – Declaration

I certify that the information supplied on this form is correct. I agree to inform IRM if my circumstances change during the year. I understand that if the information I have supplied later turns out to be incorrect, this may breach the code of conduct and could result in disciplinary action.

Signed _____ Date _____

THANK YOU FOR YOUR APPLICATION.

APPLICATION GUIDANCE NOTES

IRM understands that, from time to time, some members may experience financial hardship and find it difficult to pay their annual subscription. Concessionary rates are therefore available to members who are unemployed, unable to work due to sickness or disability, or taking a career break.

If you wish to apply for a concessionary rate please complete and return this form to us by 30 September. Please note that if you do not renew by 30 September your membership will lapse and all membership benefits will cease.

Each concessionary rate will be determined by IRM on an individual basis. Approval of a concessionary rate is valid for only one subscription year. If you wish to renew your subscription at a concessionary rate you must re-apply each year.

Members may receive a concessionary rate for a period up to a maximum of 3 consecutive years.

If you are granted a concessionary rate you will continue to retain your current membership category and be entitled to receive all the usual member benefits including the use of IRM designatory letters.

Concessionary rates are not subject to any other IRM discount and cannot be granted retrospectively.

Concessionary rates are offered at the discretion of the IRM and may be withdrawn at any time. Decisions are final and are not subject to an appeals process.

Data protection: The information contained on this form will be treated as strictly confidential. It will not be passed to a third party. It will be used solely for the purpose of determining your eligibility for a concessionary rate and will not be stored on our database. A paper copy of the form will be kept on file.

Please return this form no later than 30 September to:

Membership
IRM
2nd Floor Sackville House
143-149 Fenchurch Street
London
EC3M 6BN
Tel: +44 (0)20 7709 9808
Email: renewals@theirm.org