

Application to Join The Institute of Metal Finishing



MEMBERSHIP GRADE SOUGHT

Affiliate/Student
(Delete as appropriate)

Please complete the following:

(Please use block capitals throughout)

Surname/Family Name..... (Dr/Mr/ Mrs/Miss/Ms)

Forenames Nationality DOB

Private Address

.....
.....

..... Post code

Telephone number:

E-mail address

Current employer:

Employer's address and telephone No

.....

Only Student Applicants to complete the rest of this page

College attended

Address

.....
.....

..... Post code

Telephone number Fax. number

Course being studied.....

All Applicants to complete this page

Qualifications (Academic or Professional) ... please give name of the Awarding Body if not obvious

Date:	Qualification:
.....
.....

Experience in metal finishing/surface engineering industry

Company/Organisation	Period	Position Held
.....
.....
.....
.....

All members are entitled to attend any non-fee paying Branch or Group event which without further payment. However, to enable special local Branch and Group information to be sent, please indicate any Group or Branch you wish to be affiliated to, as shown below:

- Branches: East Midlands / Irish / London / Midlands / Southern
- Groups: Future / Mechanical Finishing / Organic Finishing

Subscription All applicants for new membership should enclose payment to cover the Affiliate (£55.00) rate (Student free).

Declaration

I, the undersigned, apply to be admitted to the Institute of Metal Finishing as an Affiliate/Student* and undertake, in the event of my election, to act professionally, to maintain the dignity and welfare of the Institute and to observe the Institute's Code of Conduct for Members (June 2001).

Signature of Applicant Date

*Delete as appropriate