

BRITISH INSTITUTE OF FUNERAL DIRECTORS

Administration Office: 10 St John Road, Wroughton, Swindon SN4 9ED

Email: admin@bifd.org.uk

Telephone: 0800 032 2733

2022/23 MEMBERSHIP SUBSCRIPTION RENEWAL

Please complete this form IN FULL and return it with your payment and any supporting documents, as required.

| Name: | | BIFD Membership No.: |
|------------|-----------------------------|----------------------|
| Address: | | |
| Town: | County: | Post Code: |
| Telephone: | Email: please print clearly | |

I hereby apply to renew my membership in the British Institute of Funeral Directors, as follows:

| ✓ | MEMBERSHIP TYPE | | SUBSCRIPTION AMOUNT | | |
|-------------------------------|-------------------------------------------------------------------------------------------|------------------------------------|---------------------|--------|--------------|
| | Licenced Full Member (CPD FORM MUST BE COMPLETED) | | £185.00 | | |
| | Full Member | | £160.00 | | |
| | Retired Member (voting) | | £ 75.00 | | |
| | Retired Member (non-voting) | | £ 50.00 | | |
| | Student Member | | £ 75.00 | | |
| | Associate Member | | £100.00 | | |
| ✓ | ADDITIONAL MEMBER | R ITEMS | Quantity | Cost | TOTAL AMOUNT |
| | Additional copies of Annual Licence (ONLY available to Full Members with a Licence, as | above) | | £10.00 | £ |
| | Member's Lapel Badge | | | £ 5.00 | £ |
| | Member's Window Sticker | | | £ 2.45 | £ |
| | Member's Tie (normal straight tie) | | | £12.50 | £ |
| | Member's Tie (clip-on tie) | | | £12.50 | £ |
| | BIFD Text Book Certificate & Diploma (co | ost of each) | | £65.00 | £ |
| Total Additional Member Items | | | £ | | |
| Member's Signature: | | Membership Subscription (as above) | | £ | |
| | | | TOTAL TO PAY | | £ |

| ✓ | Payment Method | | | |
|---|----------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| | Cheque - enclosed (Cheques to be made payable to the British Institute of Funeral Directors) | | | |
| | BACS (internet banking) Sort Code: 60-83-01 Account No.: 20336550 (please quote your surname as the reference when paying by BACS / Internet Banking) | | | |

To opt out of allowing your personal information to be shared, please tick the box.

PLEASE NOTE: If you are applying for a Licence, you must complete the 2021/22 CPD Return and enclose it with your Subscription Renewal. CPD Returns will be checked and verified and you may be contacted and requested to supply additional information if we need further verification.