



Complete both sides and return to:
Institute of Financial Planning, Whitefriars, Lewins Mead, Bristol BS1 2NT

Subscription Rates (All rates are per person)

| | | | |
|--|----------------|--|----------------|
| ONE OFF JOINING FEE: | £25.00 | ANNUAL DIRECT DEBIT RATES: | |
| ANNUAL RATES: | | Membership & CFP ^{CM} Certification | £260.00 |
| Membership & CFP ^{CM} Certification | £265.00 | Membership | £170.00 |
| Membership | £175.00 | Paraplanner | £87.50 |
| Paraplanner | £87.50 | Student/retired | £25.00 |
| Student/retired | £25.00 | | |

Role Financial Planner/Adviser Paraplanner Other Student Retired (Please select one)

Title Mr Mrs Ms Dr Other (Please select one)

First Name(s)

Surname

Date of Birth

Company Name

FSA No.

Job Title

Business Address

Postcode

Mailing Address (if different from above)

Postcode

Daytime Telephone

Mobile

Email

I hereby apply for membership of the IFP and agree to abide by the IFP's Code of Ethics and Professional Practice including annual CPD requirements. These may be approved or amended from time to time. I accept the provisions of the IFP's Disciplinary Code*.

Signed

Date

*To download these documents go to www.financialplanning.org.uk.

Method of Payment (Please select one)

- Cheque** Please make cheques payable to 'Institute of Financial Planning'.
- Direct Debit** Please complete direct debit mandate and sign overleaf.
- Mastercard/VISA/VISA Debit/Maestro** (Amex not accepted). Please complete payment card details and sign overleaf.



Complete both sides and return to:
Institute of Financial Planning, Whitefriars, Lewins Mead, Bristol BS1 2NT

Office Use Only

Member No.: Date received:

Note:

.....

Please complete EITHER section 1 or 2 and return the form to the IFP, Whitefriars Centre, Lewins Mead, Bristol BS1 2NT

1. INSTRUCTION TO YOUR BANK/BUILDING SOCIETY TO PAY BY DIRECT DEBIT

1. Name of your Bank or Building Society branch.

Address

Post Code



Originator's Identification No

| | | | | | |
|---|---|---|---|---|---|
| 7 | 2 | 7 | 5 | 4 | 7 |
|---|---|---|---|---|---|

2. Name of account

3. Bank sort code

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

4. Bank or Building Society account no.

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

5. Reference no.

| |
|-----|
| IFP |
|-----|

6. Instruction to your Bank or Building Society
Please pay Institute of Financial Planning Limited Direct Debits from the account details on the instruction subject to the safeguard assured to the Direct Debit Guarantee. I understand that this instruction may remain with the Institute of Financial Planning Limited and, if so, details will be passed electronically to my Bank/Building Society

Signature _____
Date _____

2. INSTRUCTION TO THE IFP TO TAKE PAYMENT BY CARD

I authorise the IFP to charge my Card the sum of £

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

 for my membership. I understand that the IFP will charge my renewal fee on an annual basis to my credit card until such time as I instruct them, in writing, to do otherwise.

*Maestro only

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|--|--|---------------------------------------|--|--|--|--|--|--|---|--|--|--|--|--|--|--|--|--|--|---|--|--|--|--|--|--|--|--|--|--|---|--|--|--|--|--|--|--|--|--|--|------------------|-------------|
| <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | Card start date* | Issue No. * |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Card Number (Cards accepted: Mastercard / VISA / VISA Debit / Maestro) | | | | Card expiry date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name on card | | | | 3-digit security code on card reverse | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cardholder's Address | | | | Cardholder's Signature | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Banks and Building Societies do not accept Direct Debit instructions from some types of accounts.

THE DIRECT DEBIT GUARANTEE

- This Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the scheme is monitored and protected by your own Bank or Building Society.
- If the amounts to be paid or the payment dates change, the Institute of Financial Planning Limited will notify you ten working days in advance of your account being debited or otherwise agreed.
- If an error is made by the Institute of Financial Planning or by your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.
- You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please send a copy of your letter to the Institute of Financial Planning.