

#### Student Membership Application

Student members must be enrolled at a college or university on a forestry, arboriculture or a related course. Each application must be supported by an ICF chartered member or a course tutor who is personally acquainted with the applicant and can endorse the statements made by the applicant in this form.

**Students must provide a copy of their matriculation card.**

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| **Personal Details** | | | | | | | | | | |
| **Title:** | |  | | | **Home Phone:** | | | |  | |
| **Full name:** | |  | | | **Mobile Phone:** | | | |  | |
| **Permanent Address:** | |  | | | **Personal Email Address:** | | | |  | |
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|  | | | **Student Email Address:** | | | |  | |
| **Postcode:** | |  | | |  | |
| **Term Time Address** (if different to above) | |  | | | **Date of Birth:** | | | | *dd/mm/yy* | |
|  | | | **Gender:** | | | |  | |
|  | | | **Nationality:** (Delete as appropriate) | | | | *UK National / EU National / International* | |
| **Postcode:** | |  | | |
| **Course of Study** | | | | | | | | | | |
| **Name of University or College:** | | |  | | | | | | | |
| **Course Title:** (e.g. BSc (Hons) in Forestry): | | |  | | | | | | | |
| **Main Subject(s):** | | |  | | | | | | | |
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| **Estimated Year of Completion:** | | |  | | | | | | | |
| Your student membership will automatically renew each year, until 31 December in the year in which you complete, at which point you will be expected to progress to Associate membership**.** | | | | | | | | | | |
| **Additional Qualifications** | | | | | | | | | | |
| Please list details of appropriate technical, academic or professional examinations passed. | | | | | | | | | | |
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| **Applicant’s Declaration** | | | | | | | | | | |
| I certify that the information contained within this form is true and accurate to the best of my knowledge and belief. I understand that any information that is knowingly withheld, suppressed, deliberately misleading or false, may make me liable, if elected as a Member of the Institute of Chartered Foresters to dismissal from the Institute.  If elected to membership of the Institute, I agree to comply with the Royal Charter, Bylaws and Regulations of the Institute of Chartered Foresters and with any subsequent amendments and/or alterations which may be made to them. | | | | | | | | | | |
| I have attached a copy of my matriculation card (please tick): | | | | | | | | | |  |
| **Signed:** |  | | | **Date:** | | |  | | | |
| **Your Data** | | | | | | | | | | |
| The Institute works hard to ensure that your data is held and used in compliance with the General Data Protection Regulations and with the Data Protection Act 1998 to perform our services in relation to your membership (e.g. to issue our members’ magazine, e-newsletter and provide or access to the Members’ Area) and when you use our services (e.g. event booking).  The Institute will treat all information contained within this form as confidential. No information will be divulged to other parties, and will be used only for those purposes expressed.  To find out more, please consult the Institute’s privacy policy, which you can find online at [www.charteredforesters.org/privacy-policy](http://www.charteredforesters.org/privacy-policy) | | | | | | | | | | |
| **Submission of Application** | | | | | | | | | | |
| Please complete the form in digital format, then print, sign and verify before posting to:  **Member Services, Institute of Chartered Foresters, 59 George Street, Edinburgh, EH2 2JG** | | | | | | | | | | |
| Signed forms may also be scanned and sent by email to [icf@charteredforesters.org](mailto:icf@charteredforesters.org) | | | | | | | | | | |
| **Payment of Subscription Fees** | | | | | | | | | | |
| Payment of your membership subscriptions fees is due within 30 days of submission of your application.  If you do not pay within this time, your application will be discarded and your data will be removed from our database. You will need to submit a new membership application if you still wish to join us.  **Cheque Payment**  Cheques made payable to Institute of Chartered Foresters should be sent with your with your application.  **BACS or Card Payment**  If you do not enclose a cheque with a posted application, we will send you an invoice by email using the details above. You can then pay by BACS using the bank details provided on your invoice, or by card over by calling the Institute on 0131 240 1425.  **Receipt**  We will provide a receipt for your subscription payment by email to the address given above. | | | | | | | | | | |
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| **OFFICE USE ONLY** | | | | | | | | | | |
| **Membership approved/not approved** | | | | | | **Date:** | |  | | |
| **Signature of Member Services Director:** | | | | | |  | | | | |
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