

# Membership Application Form

Complete your professional image



**Please ensure that you read the accompanying notes when completing this application form.**

If there is not enough room for your answers, please continue on a separate sheet of paper. Our Membership Secretary will be pleased to help you with any questions you may have. Tel: +44(0)1708 463108 Fax: +44(0)1708 448987 Email: membership@ciphe.org.uk.

## 1. Membership Categories

The Chartered Institute bases its membership criteria on approved qualifications. Please tick the appropriate box of the membership category you are applying for. Please note that the Institute's Membership Panel/Committee will place you in the category of membership it considers appropriate based upon the information you supply with your application.

### Fellow (FCIPHE)

Holds HNC/HND/Degree in relevant engineering discipline and is employed in a senior managerial position (i.e. consultant)

### Member (MCIPHE)

Holds NVQ Level 3 or City & Guilds Advanced Craft Certificate with appropriate practical experience

### Associate (ACIPHE)

Holds NVQ Level 2 or City & Guilds Craft Certificate with appropriate practical experience

### Trainee

Please contact the Membership Department on 01708 463108 and request a Trainee Membership pack

### Affiliate

Holds Level 2 in a plumbing or heating discipline and working to gain practical experience

### Companion (CompCIPHE)

Open to anyone who is connected with the plumbing & heating industry and supports the work of the Institute

### EC<sup>(UK)</sup> Registration

Suitably qualified Fellow or Member applicants will be automatically registered as an Engineering Technician (EngTech) unless they state otherwise.

*Please complete the rest of this form in full. Your application cannot be processed if you leave out vital information. If you have any questions please contact the Membership Secretary.*

## 2. Personal details

Surname (Mr/Mrs/Miss/Ms) \_\_\_\_\_ First name(s) \_\_\_\_\_

Home address \_\_\_\_\_

Postcode \_\_\_\_\_

Telephone (Home) \_\_\_\_\_ (Business) \_\_\_\_\_

Mobile \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_

### For Office use only

Recd. \_\_\_\_\_ Category \_\_\_\_\_ Branch \_\_\_\_\_

Accepted \_\_\_\_\_ Batch no. \_\_\_\_\_ Reg no. \_\_\_\_\_ Paid \_\_\_\_\_

### 3. Education and Training

List below details of any qualifications you hold.

*Please ensure copies of certificates are enclosed. Your application will not proceed without this information. If certificates are no longer available please state this clearly.*

Name of college	Courses taken/subjects passed and qualifications obtained	Dates from/to

### 4. Work Experience

List below details of your work experience, giving names of any employers, areas of work you undertake, your roles and responsibilities and length of employment. *Your application will not proceed without this information. If necessary please continue on a separate sheet or enclose an up-to-date CV.*

Name & location of employer	Responsibilities/duties	Dates

### 5. Professional Development (PD)

List below details of PD events you have attended (e.g. Water Regulations/OFTEC/manufacture's training courses, etc.)

Course Provider	Courses taken/qualifications gained	Dates from/to

## 6. Practical Competence

If you are a practicing engineer, in which aspects of plumbing and heating do you consider yourself competent?

(Tick all that apply)

<input type="checkbox"/> Hot and cold water supply pipework	<input type="checkbox"/> Discharge pipework and drainage
<input type="checkbox"/> Weathering of structures and buildings	<input type="checkbox"/> Sanitary appliances
<input type="checkbox"/> Gas installations*	<input type="checkbox"/> Space heating
<input type="checkbox"/> Unvented hot water ( <i>Only those who have passed a recognised UVHWSS training course will be listed – evidence is required</i> )	

**\*If you are a UK self-employed practitioner or employee operative engaged in gas work, you must give details of your business or operative GAS registration details below:**

GAS registration number \_\_\_\_\_ Date of initial registration \_\_\_\_\_

Name of your business (if applicable) \_\_\_\_\_

## 7. Plumbing Companies

Name of Company \_\_\_\_\_

How many operatives do you employ? \_\_\_\_\_

Please note, the Institute is a professional body that registers individuals. If you own an installation company you would need to apply for the description of Registered Plumbing Company if you are accepted as a Registered Plumber (see details enclosed with the membership pack).

## 8. References

Please supply the details of two persons who know you in a professional capacity (i.e. other plumbers, builders, consultants, architects, etc.) – NOT relatives. References from customers or merchants will not be accepted.

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Tel (daytime) \_\_\_\_\_

Email \_\_\_\_\_

Occupation \_\_\_\_\_

CIPHE mem.no. \_\_\_\_\_ (if applicable)

Non-CIPHE member, please send an application form

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Tel (daytime) \_\_\_\_\_

Email \_\_\_\_\_

Occupation \_\_\_\_\_

CIPHE mem.no. \_\_\_\_\_ (if applicable)

Non-CIPHE member, please send an application form

## 9. Data Protection Act

We may from time to time wish to release your name and details to third parties. If you would prefer us not to do this, please tick box.

Please now turn to the following page to read and sign the declaration and fill in payment details. The initial membership payment will be taken via cheque or credit/debit card, however, applicants are asked to complete the Direct Debit section. Direct Debit is the easiest way to pay your membership subscription year-on-year.

Before you send this form back to the Institute please take the time to double check that you have:

- Filled out every section applicable, to the best of your ability.
- Enclosed photocopies of all formal qualifications (your application cannot proceed without this).
- Enclosed payment and Direct Debit details.

If you have any questions please contact the Membership Secretary, Tel:+44(0)1708 463108 / 463107 Email: [membership@ciphe.org.uk](mailto:membership@ciphe.org.uk).

Please return your completed application, evidence of qualifications together with your payment to:

**The Membership Secretary, CIPHE, 64 Station Lane, Hornchurch, Essex RM12 6NB. ENGLAND**

## 10. Declaration

Please read and sign the declaration below.

*I, the undersigned, apply to be enrolled as a member of the Chartered Institute of Plumbing & Heating Engineering. I certify the statements on this application are true and that, if elected and enrolled, I will agree to be governed by the Royal Charter and Bye-Laws of the Chartered Institute of Plumbing & Heating Engineering. If my certificates are no longer available, I will sign a declaration and in the event that any information hereby supplied is inaccurate or misleading, I accept that following investigation by the Chartered Institute of Plumbing & Heating Engineering, my membership may be terminated.*

Signed \_\_\_\_\_ Date \_\_\_\_\_

## 11. Payment of entrance and first year's membership fee

All payments are to be made in £ sterling. Please see the list of current fees included in this membership pack. Please pay your entrance and membership fee via cheque or credit/debit card.

**Cheque** - I enclose my cheque for £ \_\_\_\_\_ made payable to the CIPHE.

**Credit card** - Please charge my MasterCard/Visa/Delta/Switch/Solo (delete as necessary) with £ \_\_\_\_\_

Card Number   
Expiry Date / Issue Number (Switch/Solo)  Start Date /

Signed \_\_\_\_\_ Date \_\_\_\_\_

## 12. Direct Debit - future membership subscription for year-on-year payment

Institute membership runs on a yearly basis. The preferred method of payment for your annual membership subscription is by Direct Debit.

Name(s) of account holder(s) \_\_\_\_\_

Originator's identification number

Bank/Building Society account number

Branch sort code

Name and full address of your Bank or Building Society:

To the Manager Bank/Building Society

Address \_\_\_\_\_

Postcode \_\_\_\_\_

OFFICIAL USE ONLY:

Reference: (CIPHE Membership Number)

For the Chartered Institute of Plumbing & Heating Engineering OFFICIAL USE ONLY This is not part of the Instruction to your Bank or Building Society

If signature(s) is not that of the CIPHE member, please provide full postal address of signatory:

Name in capitals .....

Address .....

### Instruction to your Bank or Building Society

Please pay the Chartered Institute of Plumbing & Heating Engineering Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that the instruction may remain with the Chartered Institute of Plumbing and Heating Engineering and, if so, details will be passed electronically to my Bank/Building Society.

Signature(s) \_\_\_\_\_ Date \_\_\_\_\_

Please note: Banks and Building Societies may not accept Direct Debit Instruction from some types of account.

If paying by **Direct Debit**, the below Guarantee should be detached and retained by the payer.



### 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 does change, the Chartered Institute of Plumbing & Heating Engineering will notify you ten working days in advance of your account being debited or as otherwise agreed.
- If an error is made by the Chartered Institute of Plumbing & Heating Engineering or 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 also send a copy of your letter to CIPHE.