

# Membership of the CICM

## Application form

This application form can be used to join as a new **Affiliate** or **Studying Member** of the CICM, or to re-join at any level.

If you wish to apply for professional membership of the CICM (Associate, Member or Fellow), and have not been a member before, please see our website for the online submission process.

### Which membership is right for me?

**Affiliate membership** is open to all who are working or interested in credit management/collections. It gives you immediate access to CICM resources to help you in your role and career. Affiliate membership is a great choice if you want access to the latest credit management research, advice, best practice and news, as well as the popular CM Magazine, webinars, blogs, articles and more.

**Studying Membership** is open to all who are studying a CICM qualification, working their way to achieve their first level of professional membership. It gives you immediate access to CICM resources to support you in your studies, career and role. To gain access to Studying Member you must be studying with CICM. You will have access to Studying Membership for a maximum of three years, when you will be automatically moved to Affiliate.

**Title:**

**First name:**

**Middle name:**

**Surname:**

**Date of Birth:**

#### Join online today

If you are paying by card, the easiest way to join as an Affiliate or Studying Member is online. Please go to JOIN NOW on our website.

If you are paying by direct debit, please complete this form.

Please choose one of the two options below:

I wish to apply for Affiliate membership

I wish to join as a Studying Member (including Taking Control of Goods)

I wish to re-join, and my old membership number is:

If applying for **Studying Member**, please tick the relevant options below:

I am joining to access Taking Control of Goods exams/development

I am studying for a CICM qualification.

I am/will be completing an Apprenticeship

## **SECTION ONE: Your contact details**

### **HOME**

Address

Postcode

Email

Tel

Mobile

Unique Learner Number (ULN) *(if known)*

Twitter account @

Linkedin

### **WORK**

Job title

Organisation

No. working in credit and collections

Address

Postcode

Email

Tel

Mobile

Please send my Credit Management Magazine (postal), membership and branch correspondence including emails to my:

Home

Work

## SECTION TWO: Payment

Your membership will be processed on receipt of payment.

<b>Registration/Re-join Fee</b>	<b>£55</b>	<b>(one off fee) plus</b>
Affiliate subscription	£95	
Studying Member	£57	
Associate (re-joining)	£130	
Member (re-joining)	£180	
Fellow (re-joining)	£195	

### I will pay by:

**Direct Debit one payment:** complete the form below

**Direct Debit 12 payments:** complete the form below

**Debit or credit card:** call us on 01780 722903 (NB: we do not accept Amex) or join online

**Cheque:** please attach a cheque made payable to the Chartered Institute of Credit Management

I am paying for/have already paid for membership as part of a CICM learning package

Please send me a receipt



Chartered  
Institute  
of Credit  
Management



Please indicate  
if appropriate ✓

**A Direct Debit**  **One payment**  **12 payments** (please specify)

I will pay the amount by Direct Debit, and have completed the mandate below. I will return by post.

**PLEASE COMPLETE USING A BALL POINT PEN AND SEND IT TO:**

Chartered Institute of Credit Management  
The Water Mill, Station Road,  
South Luffenham, OAKHAM, LE15 8NB

Instruction to your Bank or Building  
Society to pay by Direct Debit

Originator's Identification Number

9 | 9 | 2 | 7 | 9 | 1

Name(s) of Account Holder(s)


Bank/Building Society account number

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Branch Sort Code

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Name and full postal address of your Bank or Building Society

To the Manager Society	Bank/Building Society
Address	
Postcode	

Reference Number (CICM to complete)

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<p><b>FOR CICM OFFICIAL USE ONLY</b></p> <p>This is not part of the instruction to your Bank or Building Society.</p> <p>Membership number</p> <table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> </table>								

**Instruction to your Bank or Building Society**

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

Signature(s)
Date

Banks and Building Societies may not accept Direct Debit instructions for some types of account.



This guarantee should be detached and retained by the Payer

**THE DIRECT DEBIT GUARANTEE**



- This guarantee is offered by all Banks and Building Societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit the Chartered Institute of Credit Management will notify you 10 or more working days in advance of your account being debited or as otherwise agreed. If you request the Chartered Institute of Credit Management to collect payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit by the Chartered Institute of Credit Management or your Bank or Building Society, you are entitled to a full and immediate refund of the amount paid from your Bank or Building Society.
- If you receive a refund you are not entitled to, you must pay it back when the Chartered Institute of Credit Management asks you to.
- You can cancel a Direct Debit at any time by simply contacting your Bank or Building Society. Written confirmation may also be required. Please also notify the Chartered Institute of Credit Management.

## SECTION THREE: Ethnic group

The CICM is committed to racial equality. We invite you to tick the box that you feel describes your ethnic origin. These have been based on the 2011 Census ethnic group classifications

White - British

White – Irish

Any other white background

Black or Black British – Caribbean

Black or Black British – African

Any other Black background

Asian or Asian British – Indian

Asian or Asian British – Pakistani

Asian or Asian British – Bangladeshi

Asian British – Chinese

Mixed – White and Black Caribbean

Mixed – White and black African

Mixed – White and Black Asian

Any other mixed background

Other ethnic group – Arab

Gypsy or Irish traveller

Chinese

Other – please state

Prefer not to disclose

## SECTION FOUR: Data Privacy

The Chartered Institute of Credit Management (CICM) holds and processes your ‘personal data’ in order to give you the full benefits of being a Member. We would like you confirm how you would like us to communicate with you, please select (v) your choices below:

### Communication

Email    SMS    Telephone    Post

Membership

Monthly Newsletter

Monthly Technical Briefing

Credit Management magazine

Branch Mailings

Events

Qualifications

Training

Recruitment

By confirming your preferences above you are giving CICM consent to contact you.

We will from time to time ask you to update your details to ensure we can communicate effectively. At all times, you will have the option to opt-in or unsubscribe from communications or change your preferences.

Our Privacy Notice provides the information we are required to give in relation to the processing of personal data under EU law and can be found at [www.cicm.com](http://www.cicm.com)

## **SECTION FIVE: Checklist and Declaration**

### **Checklist: I have**

Selected the level of membership I am applying for

Completed each section of the form

Enclosed proof of identity - a copy of your passport or photographic driving licence

Enclosed payment details/selected payment option

Signed the declaration (below)

Then you are ready to send your application and start your CICM membership.

Please send this completed application form to **CICMmembership@cicm.com**

Or post to:

The Membership Department  
Chartered Institute of Credit Management  
The Water Mill  
Station Road  
South Luffenham  
OAKHAM  
LE15 8NB

### **Declaration**

I declare that all the particulars I have provided are correct. I undertake to further the best interests of the CICM and to abide by its Code of Professional Conduct (see [www.cicm.com](http://www.cicm.com)).

Signed

Date