Application Form

For Affiliate, Student and Associate Member

Membership Requirements
Please ensure that you read the requirements details for your intended grade before completing this application.

Affiliate– There are no formal requirements. Affiliates are persons who have an interest in mathematics and its applications and who wish to participate in the activities of the Institute.

Student– Student Members must be pursuing a course of study leading to one of the following qualifications: a degree in mathematics, a degree in mathematics in combination with another subject, a joint degree in mathematics with another subject or a degree with a sufficient mathematical component such as would be expected in physics or engineering.

Applications should be accompanied by confirmation of appropriate studies, for example a copy of a letter confirming registration on a relevant course.

Associate Member – Associate Members must hold one of the following: a degree in mathematics, a degree in mathematics in combination with another subject, a joint degree in mathematics with another subject or a degree with a sufficient mathematical component such as would be expected in physics or engineering.

Applications for Associate Membership should be accompanied by a transcript.

Note: Full-time postgraduate students may become or remain Associate Members but may opt to pay the Student subscription rate for up to three years.

How to Apply
Applications must be made using an Institute application form which must be signed. The signature constitutes a contract to abide by the rules of the Institute.

The supporting information required for the Student or Associate Member grade must be supplied with the application.

A properly completed application will not be processed until the appropriate fees are received. Current fee details can be found in the membership section of our website www.ima.org.uk or in a membership application pack.

Transfer & Reinstatement applications
A new application form and the appropriate documentation for the grade must be supplied even though some of the information is already known to the Institute. This allows applications to be processed quickly and efficiently.

Code of Conduct
Members must adhere to the Institute’s Code of Conduct. A copy can be found in the Activities/Professional section of our website www.ima.org.uk. A copy will also be included in new members packs.

For Office Use Only

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<th>Date Received</th>
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PERSONAL DETAILS:

*Male/Female            Surname or Family Name: …………………………………………………………………………………
*delete as appropriate

Title: ………………………………………………………………………………………………………………………………………
First Name: ………………………………………………………………………………………………………………………………

Middle Name(s): ………………………………………………………………………………………………………………………

Date of Birth: ……………………… Nationality: …………………………………………………………………………………

Please indicate the grade of membership you wish to apply for:

AFFILIATE / STUDENT / ASSOCIATE MEMBER

Conditions of Membership
I agree that upon election to membership I will be bound by the bylaws of the Institute’s Royal Charter and by the
rules and regulations of the Institute.

I understand that if I wish to withdraw from membership I must notify the Executive Director of the Institute in writing,
after payment of any arrears due from me.

Declaration
I wish to apply for membership of the Institute of Mathematics and its Applications and I confirm that the details
provided in this application are correct.

Signed: …………………………………………………………………………………………………………………………………
Date: …………………………………

CONTACT DETAILS:

Home

Address: ………………………………………………………………………………………………………………………………………

Town: ………………………………………………………………………………………………………………………………………

County/State: ………………………………………………………………………………………………………………………………

Post Code/ Zip: ……………………… Country: …………………………………………………………………………………

Email: ………………………………………………………………………………………………………………………………………

Phone Number: ……………………… Mobile: ………………………………………………………………………………………

Work

Name: ………………………………………………………………………………………………………………………………………

Job Title: ………………………………………………………………………………………………………………………………………

Address: ………………………………………………………………………………………………………………………………………

Town: ………………………………………………………………………………………………………………………………………

County/State: ………………………………………………………………………………………………………………………………

Post Code/ Zip: ……………………… Country: …………………………………………………………………………………

Email: ………………………………………………………………………………………………………………………………………

Phone Number: ……………………… Fax Number: …………………………………………………………………………………

Please state preferred mailing address *Home/Work Please state preferred email address *Home/Work

Will your employer pay for or reimburse your subscription?: *Yes/No.
*delete as appropriate
QUALIFICATIONS (Post GCE A Level equivalent):

Note: Applicants for Affiliate Membership Need not complete this section.

Current Studies (if applicable):

University/College: ..............................................................................................................................................
Qualification: ......................................................................................................................................................
Main Subject(s): ..................................................................................................................................................
Probable month and year of completion: ...................................................................................................................

Completed Studies (if applicable):

University/College: ..............................................................................................................................................
Qualification: ......................................................................................................................................................
Main Subject(s): ..................................................................................................................................................
Class or Distinction: .............................................................................................................................................
Date of award: ......................................................................................................................................................

University/College: ..............................................................................................................................................
Qualification: ......................................................................................................................................................
Main Subject(s): ..................................................................................................................................................
Class or Distinction: .............................................................................................................................................
Date of award: ......................................................................................................................................................

University/College: ..............................................................................................................................................
Qualification: ......................................................................................................................................................
Main Subject(s): ..................................................................................................................................................
Class or Distinction: .............................................................................................................................................
Date of award: ......................................................................................................................................................

FIRST SUBSCRIPTION PAYMENT (Please see fee sheet for current fees and payment methods)

Please indicate payment method and supply the appropriate information

☐ I have arranged for a bank transfer. Payee Reference is: ..................................................................................
☐ I have enclosed a cheque (Made payable to the IMA) for the amount of: ............................................................
☐ Please charge my Credit/Debit Card. Card Type: ..................................................................................................
  Card Number: ..................................................................................................................................................
  Valid from Date: ..................................................................................................................................................
  Expiry Date: ..................................................................................................................................................
  Security Code*: .................................................................................................................................................
  (‘Last 3 digits on back of card)
  Issue No: (Switch only).......................................................................................................................................
In Order to maintain membership, should your application be successful, applicants who hold an appropriate bank account are requested to complete and return the attached Direct Debit instruction with their application.

Direct Debit – Your Questions Answered

Q Can I cancel a Direct debit instruction once it is set up?
A Yes, Instructions can be cancelled at any time by simply contacting your bank or building society, written confirmation may be required. Please also notify The Institute of Mathematics and its Applications (IMA).

Q What sort of account do I need to use?
A Most current accounts at banks and building societies can be used to make Direct Debit payments. Even some special savings accounts also accept them, just ask at your branch.

Q What happens if a mistake is made?
A If an error is made by the IMA or your Bank or Building Society, you are guaranteed a full and immediate refund (see Direct Debit guarantee for details).

Q Once set up, do I have to do anything?
A No, other than making sure there is enough money in your account when payment is due. The IMA will let you know at least 28 days in advance what the collection date and amount are.

Q What happens if changes are made?
A If either the amount or the payment date changes the IMA will notify you at least 28 days in advance of your account being debited.

Q Will I still receive a notice of subscription renewal?
A Yes, but it will only be for your information.

If you have any queries regarding your Direct Debit payments please contact:

The Institute of Mathematics and its Application,
Membership Department
Catherine Richards House
16 Nelson Street
Southend-on-Sea
Essex
SS1 1EF

Telephone: 01702 354020 Fax: 01702 345111 Email: membership@ima.org.uk

Registered Charity No. 1017777
Instruction to your bank or building society to pay by Direct Debit

Please fill in using a ball point pen and send it to:

The Institute of Mathematics and its Applications
Catherine Richards House
Southend-on-Sea
Essex
SS1 1EF

Name(s) of account holder(s)

Bank/building society account number

Branch sort code

Name and full postal address of your bank or building society

To: The Manager

Address

Postcode

Institute Reference Number (will be completed by IMA)

Originator’s Identification number

970657

FOR (IMA) OFFICIAL USE ONLY
This is not part of the instruction to your bank or building society.

Date Rec’d:

Date Sent:

BACS Details:

Instruction to your bank or building society

Please pay the Institute of Mathematics and its Applications 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 Institute of Mathematics and its Applications 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 Institute of Mathematics and its Applications will notify you 28 working days in advance of your account being debited or as otherwise agreed. If you request the Institute of Mathematics and its Applications to collect a 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 Institute of Mathematics and its Applications 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 entitled to, you must pay it back when the Institute of Mathematics and its Applications asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.