

IFA retired application form 2019

Eligibility for retired membership

We offer a retired membership level and to be eligible you will need to meet the following criteria:

- fully retired from all remunerated activity; and
- be either an Associate or Fellow of the IFA.

You will also need to surrender your IFA practising certificate if you previously held one.

By accepting this level of membership your rights to act in a voluntary role are not affected. However, if you do provide voluntary services you will need to comply with the IFA's CPD requirements.

The IFA reserves the right to request evidence to support your retired membership application.

I am applying for:	YES	NO
IFA retired membership		
Tax Adviser retired membership		

Completing and submitting your application form

Complete **ALL** sections of the form using block capitals and black ink. Remember to enclose **ALL** your supporting documents and the application fee.

The information that you provide must be true, correct and up to date. It is your responsibility to inform us of any changes within 10 working days.

Forms which are Incomplete, illegible or where the application fee and supporting documents are missing will be returned unprocessed.

There are two ways to submit your application form, supporting documents and retired annual fee:

1. Email to membership@ifa.org.uk
2. Post to:

Institute of Financial Accountants

Office CS111,
Clerkenwell Workshops,
27-31 Clerkenwell Close
Farringdon, London,
EC1R 0AT

Next steps

Once we have assessed your application we will contact you with a decision about your eligibility for membership and the level of membership we can offer you.

We aim to provide a response within 15 working days. However, during October – December this may take longer as existing membership renewals are prioritised.

Personal details

Membership number	
Title	
First name	
Middle name	
Surname	
Date of birth	
Home address	
Home number	
Other address	
Work number	
Mobile number	
Email address	

	YES	NO
Do you hold membership with another professional accountancy body?		

	YES	NO
Are you in public practice?		

	YES	NO
Do you hold a practising certificate with another professional accountancy body?		

Fit and proper declaration

Section A – Financial Soundness	YES	NO
Have you, in the United Kingdom or elsewhere:		
<ul style="list-style-type: none"> • Been the subject of any debt or award that remains outstanding or was not satisfied within a reasonable period of time? 		
<ul style="list-style-type: none"> • Been declared bankrupt, subject to bankruptcy procedures, made arrangements with creditors or involved in any proceedings relating to these areas? 		
<ul style="list-style-type: none"> • Been involved as a director, partner or manager of a business that has gone into insolvency, liquidation or administration? 		
<ul style="list-style-type: none"> • Been the subject of debt collection agencies, court action by HMRC, the IFA or other third parties? 		
If you have answered 'yes' to the above, please provide details below:		
Section B – Criminal or civil offences	YES	NO
Have you, in the United Kingdom or elsewhere:		
<ul style="list-style-type: none"> • Been subject to a criminal conviction under the Relevant Offences in Schedule 3 Of the Money Laundering Regulations 2017 or equivalent legislation as may apply in other jurisdictions which is unspent? 		
<ul style="list-style-type: none"> • Been subject to, pleaded guilty or found guilty to any other offence which is unspent? 		
<ul style="list-style-type: none"> • Been subject to any adverse finding or any settlement in civil proceedings, particularly in relation to any financial business, fraud, misconduct or the formation of companies and trusts? 		
If you have answered 'yes' to the above, please provide details below:		
Section C – Good reputation and character	YES	NO
Have you, in the United Kingdom or elsewhere:		
<ul style="list-style-type: none"> • Been notified of any potential investigation and disciplinary by a professional body, tax authority, regulator, court or tribunal? 		
<ul style="list-style-type: none"> • Been subject to investigation and disciplinary proceedings by a professional body, tax authority, regulator, court or tribunal resulting in a finding? 		
<ul style="list-style-type: none"> • Been subject to disciplinary procedures by an employer resulting in a finding? 		
<ul style="list-style-type: none"> • Been dismissed, asked to resigned and resigned, from employment, position of trust, fiduciary appointment or similar? 		
<ul style="list-style-type: none"> • Been disqualified from acting a direction, trustee, or disqualified from acting in a managerial capacity? 		
<ul style="list-style-type: none"> • Been involved with a company, partnership or other organisation that has been refused registration, authorisation, and membership or licence to carry out any trade, business or profession or had that registrations, 		

authorisation, and membership or licence revoked, withdrawn or terminated?		
• Been refused entry to or excluded from membership of any profession or vocation?		
• Are you currently in the process of any investigation or disciplinary procedures as described above?		
If you have answered 'yes' to the above, please provide details below:		

Member permissions and interests

Please indicate below how you would like the IFA to communicate with you regarding IFA business partner products and services, CPD events and workshops. The IFA's preferred method of communicating is email and information regarding member offerings may not be available via other channels.

	Email	Post	Telephone	Text
I am happy to be contacted by the IFA by the following communication preferences				

Please tick yes to any of the below that apply to you.

	YES	NO
I want to be contacted by my local IFA branch chair about regular meetings and seminars that count towards my CPD and can help me in my career path.		
I want to be contacted by the IFA's business partners about their products and services.		

Verification

Before we accept your application, we may need to obtain "satisfactory evidence" to confirm your identity and we may use electronic verification for this purpose. We may also need to obtain such evidence after we have begun to act on your application. Although a record of our enquiry will be entered on your record it will not affect your credit history.

In certain circumstances, we may also need to obtain evidence confirming the identities of third parties, the source of any funds or other property, the purpose of any instructions or any other matter.

IFA data protection policy

The IFA takes your privacy seriously. All personal information provided to the IFA on this form or through any other method of communication is collected and held in accordance with the Data Protection Act 1998. Non-sensitive information may be passed to third party and partner organisations for the promotion of goods and services relevant to financial accountancy and tax.

We will treat your personal information in accordance with the data protection legislation. We will use your information for administration, communication and research. We will also use your information to carry out our responsibilities as a regulator and as a professional body. To do this, we will share your information with other organisations as required by law.

We may transfer your information outside the European Economic Area (EEA) e.g. IPA Group. These countries may not have similar data protection laws to the EEA, so if we do transfer your information we will take the necessary steps to ensure that your privacy rights are still protected.

Copies of the IFA Data Protection Policy and the Privacy and Cookie policies are available to view on the IFA website www.ifa.org.uk/dataprotection

Member undertakings

This is a formal declaration between you as the member and the IFA as your professional membership body and you must adhere to the following undertakings. The IFA reserves the right to remove you from membership and potentially begin disciplinary proceedings if you provide false information.

<p>I have read and by accepting membership, I agree to adhere to the IFA's Articles of Association, Bye-Laws, Code of Ethics, Disciplinary Regulations, Continuing Professional Development Regulations and any other guidance issued by the IFA that may relate to my membership, including but not limited to Professional Conduct in Relation to Taxation and Public Practice Regulations.</p> <p>Visit member regulations for details.</p>		
<p>I declare that:</p> <ul style="list-style-type: none"> to the best of my knowledge and belief all of the information given in this application is true and correct; I must inform the IFA of any material changes to the information I have provided within 10 working days of the change; the IFA reserves the right to contact me and/or other relevant parties to verify any of the information provided in this form or appendices; I have checked the bye-laws, regulations and other documentation of any other professional institutes I am associated to before applying to the IFA for membership; the IFA will confirm my identity using electronic verification, and where appropriate, will make further checks as part of its due diligence before accepting me for membership; and I understand that, if I am in or enter into public, I will be required to obtain a basic DBS check 		
Print your full name	Signature	Date (DD/MM/YYYY)

CPD undertakings

This is a formal declaration between you as the member and the IFA as your professional membership body regarding your CPD. The IFA reserves the right to request evidence from you to support that you have complied with CPD regulations.

Your annual CPD declaration	YES	NO
I have complied with the IFA's CPD requirements in the preceding 12 months and I can provide evidence of this if requested		
I am exempt from CPD		
<p>By ticking the exempt box above, I declare I meet the below criteria;</p> <ul style="list-style-type: none"> I provide no accountancy services (with or without rewards); and I do not act as a trustee, director of a legal entity or in any other capacity which carries with it an equivalent level of legal or financial responsibility; and I have no intention of providing the above services in the future. 		
Print your full name	Signature	Date (DD MM YYYY)
		/ /

Method of payment

Please note, if your payment bounces, is returned to us, or cancelled at a later date, then we reserve the right to apply an administration charge of £160.00

Our membership fees can be viewed at www.ifa.org.uk/membershipfees

The IFA retired annual membership is £80.00

The Tax Adviser retired annual membership is £80.00

You can apply for a dual retired membership at a cost of £125.00

Choose ONE method of payment	Tick
<p>BACS – I confirm that I am paying my fees by BACS. This method of payment provides a fast and efficient means to renew your annual membership. Simply make payment to:</p> <p>The Institute of Financial Accountants Sort code: 23-05-80 Bank account number: 27604875</p> <p>Please note: If paying via this method you must ensure that your bank uses your membership number, initials and surname as your BACS payment reference so we can locate and allocate the payment.</p> <p>Please note your application will not be assessed until your application fee has been paid/ nor will membership be fully approved until the full re-scribed fees have been paid.</p> <p>You remain liable to pay any bank charges incurred. Charges not paid may result in your membership not being renewed until all charges are received in full.</p>	
<p>STERLING CHEQUE OR BANKER'S DRAFT DRAWN ON A UK BANK – I confirm that I am paying my fees by Sterling cheque or banker's draft, made payable to the Institute of Financial Accountants.</p>	
<p>INVOICE – I would like to pay by invoice and request that an invoice is sent to the email included on the application form.</p> <p>Please note your application will not be assessed until your application fee has been paid/ nor will membership be fully approved until the all prescribed fees have been paid.</p>	
<p>PAYMENT BY DEBIT/CREDIT CARD</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p>Payment by Debit/ Visa Card</p> <p><input type="checkbox"/> Visa <input type="checkbox"/> MasterCard</p> <p>Card No.</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Expiry Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Name on Card _____ Date _____</p> </div> <p>I confirm that this card is mine. If this card is not yours please provide written confirmation and contact details of the person on whose card this is.</p>	

Please give your VAT number