

Membership re-admission form: lapsed members

Please complete the form in block capital letters and black ink.

IFA membership number:

Title (*please tick the appropriate box*) Mr [] Mrs [] Miss [] Ms [] Other (*please state*).....

First name

Surname/Family name

Date of birth (DD/MM/YY)

Place of birth

House number

Street name

TownPostcode.....

County

Country

Home telephone number

Mobile number

Email address

Employment status (*please tick the appropriate box*)

Are you in public practice? YES NO

Members who provide accountancy and/or taxation services for reward to the public are required in the United Kingdom are required to hold a practising certificate with the IFA and be supervised for AML.

View the entry requirements for obtaining an [IFA practising certificate](#)

View the entry requirements for becoming an [IFA member firm](#)

If you are in public practice the membership department will make contact with you before processing your re-instatement request.

Where your membership lapsed or you resigned more than two years ago you will need to re-apply for membership by completing a new application form. Please note that our membership criteria has changed and you may be required to undertake further study before being re-admitted.

View the entry requirements for becoming an [IFA member](#)

Fit and proper declaration

All members of the IFA must be of good character. Please complete the below fit and proper declaration below. Failure to complete the declaration will result in your application being declined.

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 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 to 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 resign 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 license revoked, withdrawn or terminated? 		
<ul style="list-style-type: none"> • Been refused entry to or excluded from membership of any profession or vocation? 		

<ul style="list-style-type: none"> 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. 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 indicate your preference below:

	YES	NO
I am happy to be contacted by the IFA's business partners about their products and services.		

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 with 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.		
Print your full name	Signature	Date (DD/MM/YYYY)

Verification

Before we accept your application, we may need to obtain "satisfactory evidence" to confirm your identity and we will 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

IFA takes your privacy seriously. All personal information provided to IFA on this form or through any other method of communication is collected and held in accordance with the General Data Protection Regulation.

We will treat your personal information in accordance with data protection legislation.

We will use your information for administering your membership, for communicating with you in respect of your membership and for IFA research.

We will also use your information to carry out our responsibilities as a regulator and as a professional body. To do this, we may share your information with other organisations as required by law.

We will 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](#).

Method of payment

View [IFA membership fees](#)

View [IFA member firm fees](#)

I confirm that I have:	YES
Fully completed the application form and signed and dated the undertakings	
Completed the payment form or enclosed a cheque where applicable	

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> <p><input type="checkbox"/> I authorise you to take the re-instatement fee of £160.00 from the card details below an invoice me for the remaining outstanding fees</p> <p><input type="checkbox"/> I authorise you to take the appropriate annual fees from the card details below in order to offer me the grade of membership I have applied for in this application form</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p>Payment by Debit/ Visa Card</p> <p><input type="checkbox"/> Visa <input type="checkbox"/> MasterCard</p> <p>Card No.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> </tr> </table> <p>Expiry Date <table style="display: inline-table; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> </tr> </table></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 (if registered for VAT)