



MEMBERSHIP APPLICATION FORM

Please complete this form and return to IMarEST along with your up to date Professional Development Report (Refer to the Guide on the website for further details) and Photocopies of your Academic certificates, signed by your referee.

Please return by post to:
 IMarEST Membership Team
 1 Birdcage Walk
 London
 SW1H 9JJ
 UK

Or electronically via:
imarest.wetransfer.com

PLEASE WRITE IN BLOCK CAPITALS

Title	
First Name	
Middle Name	
Surname	
Date of Birth	
Sex	
Nationality	

OFFICE USE ONLY

Membership Number	
Date Received	
Membership Level Applied For	
Registration Applied For	
ICP Date / Course Ref	
Membership Committee Date	
PRI Date	
Membership A1 <input type="checkbox"/> A3 <input type="checkbox"/> B <input type="checkbox"/>	Registration A1 <input type="checkbox"/> A3 <input type="checkbox"/> B <input type="checkbox"/>
Application Processed <input type="checkbox"/>	Payment Processed <input type="checkbox"/> Scanned to CRM <input type="checkbox"/> Scan checked <input type="checkbox"/>

1. CONTACT DETAILS: Please indicate preferred e-mail address for correspondence Home OR Business

HOME ADDRESS _____
_____ Postcode _____

Country _____ Email _____

Tel _____ Mobile _____

BUSINESS ADDRESS _____
_____ Postcode _____

Country _____ Email _____

Tel _____ Mobile _____

Name of Organisation _____

Job Title _____

2. CATEGORY OF MEMBERSHIP AND REGISTRATION (IF APPLICABLE)

MEMBERSHIP LEVEL: Please complete ALL sections if applying for Fellow Member Associate Member

If applying for Affiliate Member please fill out the following sections: 1, 2, 3, 5, 8, 9, 10, 13

(Please note: you will not need to send in copies of your Academic Certificates for Affiliate applications, however, we will require an up to date CV from you)

REGISTRATION LEVEL: I apply to register as:

<input type="checkbox"/> CEng (Chartered Engineer)	<input type="checkbox"/> CMarTech (Chartered Marine Technologist)	<input type="checkbox"/> CSci (Chartered Scientist)
<input type="checkbox"/> CMarEng (Chartered Marine Engineer)	<input type="checkbox"/> RMarTech (Registered Marine Technologist)	<input type="checkbox"/> CMarSci (Chartered Marine Scientist)
<input type="checkbox"/> IEng (Incorporated Engineer)	<input type="checkbox"/> MarTech (Marine Technician)	<input type="checkbox"/> RMarSci (Registered Marine Scientist)
<input type="checkbox"/> IMarEng (Incorporated Marine Engineer)		<input type="checkbox"/> CMarSci(Hydrography)
<input type="checkbox"/> EngTech (Engineering Technician)		<input type="checkbox"/> CMarSci(Oceanography)
<input type="checkbox"/> MarEngTech (Marine Engineering Technician)		
<input type="checkbox"/> Interim Registration (for applicants who satisfy the academic requirements of registration whilst they obtain the professional competencies)		

3. MEMBERSHIP OF OTHER PROFESSIONAL OR TECHNICAL SOCIETIES

(Please include name of organisation/ grade of membership / Engineering Council and/or Science Council registration level & number)

4. REFERENCES

Please identify an appropriate referee, a responsible person of standing in the marine community, who knows you and your work well (for example, your course tutor, a senior manager or officer at work, a corporate member of the IMarEST). Once you have completed the rest of this application form, please ask your referee to fill in the section below and to sign and date photocopies of your certificates as true copies of the originals.

I, the undersigned, recommend the above applicant, from personal knowledge, for membership of the IMarEST. I append my initials against all statements by the candidate, which I can verify.

Name _____ Position _____

Company _____ Contact Tel No _____

Email _____

If a member of The IMarEST - Membership Category _____ Membership Number _____

If registered with Engineering Council or Science Council - Registration Category _____ Registration Number _____

Capacity in which the applicant is known to you _____ I have known the applicant for _____ year(s) and support his/her application for membership

Signature _____

5. If an IMarEST Member has referred you to the IMarEST please complete their name and membership number in the below fields

Name: _____

Membership Number: _____

6. ACADEMIC QUALIFICATIONS (THIS SECTION MUST BE COMPLETED – ‘please see CV’ will NOT be accepted)

Your qualifications can help you to demonstrate evidence of your knowledge. You must submit authenticated copies (i.e. initialled by your referee as true copies of the originals) of your qualification certificates with your application form.

Start & Finish Dates	Establishment (e.g. University of Newcastle)	Degree/Diploma/Certificate (e.g. MEng(Hons) Marine Engineering)	Initials of Referee

7. SUMMARY OF CAREER PROGRESSION (THIS SECTION MUST BE COMPLETED – ‘please see CV’ will NOT be accepted)

Please include details of your current or most recent job role and **attach your Professional Development Report and a plan of CPD activities** identifying the key responsibilities and accountabilities you have had during your career to date.

Dates	Current / most recent job role	Initials of Referee

8. GENERAL AREAS OF PRACTICE (Please tick as appropriate)

- | | | |
|--|--|---|
| <input type="checkbox"/> Commercial Shipping | <input type="checkbox"/> Ship design, construction, maintenance & decommission | <input type="checkbox"/> Ports and Harbours |
| <input type="checkbox"/> Defence and Naval Engineering | <input type="checkbox"/> Marine Engineering Systems and Equipment | <input type="checkbox"/> Power & Propulsion |
| <input type="checkbox"/> Coast & Ocean Mapping & Hydrography | <input type="checkbox"/> Navigation & Communication | <input type="checkbox"/> Marine Environment & Pollution |
| <input type="checkbox"/> Coastal & Shelf Seas | <input type="checkbox"/> Fishing, Aquaculture & Biotechnology | <input type="checkbox"/> Marine Finance, Insurance & Risk |
| <input type="checkbox"/> Marine Law, Governance & Regulation | <input type="checkbox"/> Marine Renewables | <input type="checkbox"/> Marine Safety & Security |
| <input type="checkbox"/> Oceanography Climatology & Marine Meteorology | <input type="checkbox"/> Natural Hazards | <input type="checkbox"/> Offshore Oil & Gas |
| <input type="checkbox"/> Underwater Technology & Operations | <input type="checkbox"/> Marine Leisure | <input type="checkbox"/> Education & Training |
| <input type="checkbox"/> Publishing/Media | <input type="checkbox"/> Recruitment & Manning | <input type="checkbox"/> Research & Consultancy |
| <input type="checkbox"/> Societies, Associations & NGO's | <input type="checkbox"/> Other, please state | |

9. DECLARATION

I hereby confirm that the statements made in this application are, to the best of my knowledge and belief, correct. I agree to abide by the IMarEST's Code of Professional Conduct (please see our website for details), to maintain my Continuing Professional Development and to uphold the values and principles of the IMarEST.

Signature: _____ Date: _____



The IMarEST is committed to protecting and respecting your privacy. In accordance with the EU General Data Protection Regulation, the personal data collected in this form will be processed securely in order to provide you with the service(s) requested. To learn more about how the IMarEST collects, processes and protects personal information, or to contact us about data protection, please see our Privacy Notice (www.imarest.org/privacy).

10. MEMBERSHIP AND PAYMENT DETAILS (01/10/2019 – 30/09/2020)

The IMarEST Membership year runs 1st October to 30th September.

- Candidates applying between 1st October and 30th April, will pay the full annual fee for the current membership year
- Candidates applying between 1st May and 31st July will pay the annual fee pro-rata till the end of the membership year
- Candidates applying between 1st August and 30th September will pay the full annual fee for the following membership year

Your payment will be composed of an assessment fee (if applicable), your annual subscription fee, and your registration entrance fee (if applicable).

GROUP A MEMBERSHIP FEES

Assessment Fee	GBP	AUS\$	Euro	SG\$	US\$	You Pay
Member & Fellow	£65	\$133	€80	\$123	\$94	
Annual Subscription						
Fellow	£281	\$574	€347	\$531	\$408	
Member	£243	\$496	€300	\$459	\$353	
Associate Member	£155	\$317	€192	\$293	\$225	
Affiliate	£155	\$317	€192	\$293	\$225	

GROUP B MEMBERSHIP FEES

Assessment Fee	GBP	AUD\$	Euro	SG\$	US\$	You Pay
Member & Fellow	£45	\$92	€56	\$85	\$65	
Annual Subscription						
Fellow	£124	\$253	€153	\$234	\$180	
Member	£106	\$217	€131	\$200	\$154	
Associate Member	£94	\$192	€116	\$178	\$136	
Affiliate	£94	\$192	€116	\$178	\$136	

REGISTRATION FEES

Assessment Fee – applicable for existing members who are applying for registration only. Fees only apply to registrations with a *

	GBP	AUS\$	Euro	SG\$	US\$	You Pay
Assessment Fee – Group A	£65	\$133	€80	\$123	\$94	
Assessment Fee – Group B	£45	\$92	€56	\$85	\$65	

REGISTRATION ENTRANCE FEES

Registration Category	GBP	AUS\$	Euro	SG\$	US\$	You Pay
Chartered*	£68	\$139	€84	\$129	\$99	
Incorporated/Registered*	£60	\$122	€74	\$113	\$87	
Technician	£33	\$68	€41	\$63	\$48	
Interim	£26	\$53	€32	\$49	\$38	

PUBLICATIONS

- All members will receive The Marine Professional in digital format as part of their membership fees
 - Associate Members, Members and Fellows will receive The Marine Professional in paper format as part of their membership fee
- Affiliate members must place an order below if they wish to receive The Marine Professional in Paper format

Subscription	GBP					You Pay
The Marine Professional (Paper format – Affiliates only)	£49.99					
Publications – Member Rates	GBP	AUD\$	Euro	SG\$	US\$	You Pay
Journal of Marine Engineering and Technology (JMET)	£58	\$118	€72	\$110	\$84	
Journal of Operational Oceanography (JOO)	£32	\$65	€40	\$60	\$46	
JMET and JOO – Both at Special Price	£75	\$153	€93	\$142	\$109	

Your payment

Prices are correct at the time of printing. To check current prices please visit our website.

Alternatively, please indicate that you are happy for any price change to be applied to your application by ticking here

Total to Pay

GROUP A	ALL COUNTRIES NOT LISTED IN GROUP B
GROUP B	ANGOLA, BANGLADESH, BRAZIL, BOTSWANA, CAMEROON, COLOMBIA, ECUADOR, EGYPT, ETHIOPIA, GABON, GAMBIA, GHANA, GUYANA, INDIA, INDONESIA, JORDAN, KENYA, KAZAKHSTAN, MALAYSIA, MALDIVES, MEXICO, MYANMAR, NIGERIA, PAKISTAN, PAPUA NEW GUINEA, PHILIPPINES, ROMANIA, SOLOMON ISLANDS, SRI LANKA, SYRIA, THAILAND, TURKEY, VENEZUELA, TANZANIA, UKRAINE, VANUATU, ZAMBIA, ZIMBABWE

11. DEADLINES FOR APPLICATION SUBMISSIONS

The IMarEST holds 6 Individual Case Panel Meetings and 6 Membership Committee Meetings annually. The final dates for submission are listed below:

Individual Case Panel (ICP) – required prior to Membership Committee if your qualifications are unaccredited

2nd September 2019, 4th November 2019, 6th January 2020, 2nd March 2020, 4th May 2020, 6th July 2020, 31st August 2020

Membership Committee

17th September 2019, 19th November 2019, 22nd January 2020, 17th March 2020, 19th May 2020, 21st July 2020, 22nd September 2020

12. APPLICANT’S CHECKLIST

- | | |
|---|--|
| 1. <input type="checkbox"/> Personal details completed | 7. <input type="checkbox"/> Qualifications listed (if appropriate) |
| 2. <input type="checkbox"/> Contact details completed | 7b. <input type="checkbox"/> Authenticated copies of academic qualifications attached (if appropriate) |
| 3. <input type="checkbox"/> Category of membership completed | 8. <input type="checkbox"/> Professional report or CV attached. |
| 3b. <input type="checkbox"/> Registration requirements completed (if appropriate) | 9. <input type="checkbox"/> Membership and payment details completed |
| 4. <input type="checkbox"/> Membership of other societies completed. | 10. <input type="checkbox"/> General areas of practice completed |
| 5. <input type="checkbox"/> Applicant’s declaration signed. | |
| 6. <input type="checkbox"/> Referee details completed. | |

APPLICANTS FOR PROFESSIONAL REGISTRATION MUST COMPLETE THE PROFESSIONAL REPORT AS PER THE EXEMPLAR, LISTING THEIR EXPERIENCE AGAINST EACH INDIVIDUAL COMPETENCY

13. PAYMENT DETAILS


Cheque (please make payable to "The IMarEST")

VISA Credit VISA Debit MasterCard Amex (GBP Only) Switch/Maestro card (Issue No.)

Card No. / / / Expiry date / Security number

Name on card: (please print) _____ Signature: _____

Payment Details

 **DIRECT Debit** For UK bank holders wishing to pay by Direct Debit send no money now. Enter your Bank or Building Society details in the Direct Debit mandate section below, and return the whole form with your application to the IMarEST. (Note - we cannot accept scanned mandates)

If you wish to pay your Direct Debit Annually please indicate so on the form below. The payment will be taken at the beginning of the following month. The IMarEST will write to you prior to taking any further membership subscription payments, which fall due annually on or around 1st October.

Instruction to your bank or building Society to pay by Direct Debit



Please fill in the form using a ball point pen and send to:
 Membership, The IMarEST, 1 Birdcage Walk,
 London, SW1H 9JJ, UK

Name and full postal address of your bank or building society

To: The Manager		Bank/Building Society
Address		
		Postcode

Name(s) of Account Holders

Name(s) of Account Holders		
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Bank/Building Society account number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Branch Sort Code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Annual Payment

Service User Number

9	9	5	2	4	7
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Reference

<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"/>
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FOR IMarEST OFFICIAL USE ONLY
 This is not part of the instruction to your bank

Instruction to your bank or building society

Please pay The IMarEST Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee.

Signature(s)

Date
