

BRITISH INSTITUTE OF FUNERAL DIRECTORS

APPLICATION FOR FULL MEMBERSHIP - 2022/23

FULL NAME			
Address:			
		Post Code:	
Telephone:	Home:	Business:	
Mobile:			
Email:			
Website: www.			
Details of qualifications ie Diploma in Funeral Service or Diploma in Funeral Directing			
I enclose my relevant subscription fee for the remainder of this subscription period ending on 31			
March 2022. Please send completed forms with a cheque to National Office, as below, or submit			
forms by email to admin@bifd.org.uk and pay by bank transfer.			
£160.00			
Bank details: British Institute of Funeral Directors			
Unity Bank Trust 60-83-01 Acct no: 20336550			
I Declare that the information furnished by me as part of this Application is correct and I agree to comply with the Rules of the Institute including the Code of Ethics.			
I Acknowledge that any Membership Certificate issued to me will remain the property of the Institute			
I Confirm that on termination of my Membership of the Institute, for any reason, I will return my Membership Certificate and cease using the logo or any advertisement containing reference to the Institute.			
I Agree to my details being shared with Institute members			
Signature:			Date:

Please forward the completed application form to: