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## APPLICATION FOR MEMBERSHIP 2021



## INSTRUCTIONS

Please fill in Sections 1 - 6 yourself. Section 7 should be filled in by your Employer or a qualified Accountant.

**Please note: All sections depicted with an \* are mandatory**

### 1. \*PERSONAL DETAILS

	Registration Number:	<input type="text"/>
Mr./Mrs./Ms:	<input type="text"/>	Date of Birth: <input type="text"/>
Surname:	<input type="text"/>	
First name(s):	<input type="text"/>	
Home Address:	<input type="text"/>	
	<input type="text"/>	
County:	<input type="text"/>	Postcode: <input type="text"/>
Home Phone:	<input type="text"/>	Office: <input type="text"/>
		Mob: <input type="text"/>
Email:	<input type="text"/>	

### 2. \*EMPLOYMENT DETAILS / MOST RECENT EMPLOYMENT DETAILS

Company Name:	<input type="text"/>	Job Title:	<input type="text"/>
Company Address:	<input type="text"/>		
	<input type="text"/>	Company Tel:	<input type="text"/>

Please specify the nature of business:

(e.g. Industry / Practice / Self Employed etc.)

### 3. \*CORRESPONDENCE

Mail to be sent to: Home  Office

**4. LOCATION FOR CONFERRING**

Dublin  Belfast

**5. \*EXAMINATION QUALIFICATIONS**

Details of Examinations passed –

(i) Year in which First Year was completed:

(ii) Year in which Second Year was completed:

(iii) Year in which Computerised Accounting Assessment was completed:

**6. \*DECLARATION**

I hereby make application for admission to membership of Accounting Technicians Ireland.

- I declare that the information given in this form is correct. I enclose a remittance for the appropriate amount.
- If accepted for membership, I undertake to observe and abide by the rules and regulations of Accounting Technicians Ireland for the time being in force.
- I recognise that membership will entitle me to provide general accountancy, book-keeping or taxation advisory services to members of the public and will **not** entitle me to set-up in practice in a regulated area of professional activity.
- I acknowledge that, on attaining membership of Accounting Technicians Ireland, I will be required to pay an annual membership subscription each year.
- I acknowledge that, on attaining membership of Accounting Technicians Ireland, I will be required to actively participate in ATI's Annual CPD scheme (exempt in 1<sup>st</sup> year of membership)
- I undertake to inform you of any change in my address or occupation.
- I recognise that the Certificate of Membership that I will receive is the property of Accounting Technicians Ireland and I undertake to return it in the event of my ceasing to be a member.

**Signed:** ..... **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**7. \*RECOMMENDATION**

To be signed by your **Employer** OR by a **qualified Accountant** affiliated to one of the following bodies (CAI / ACCA / CPA / CIMA).

**I** ..... **hereby recommend** .....  
as a suitable person to be admitted as a Member of Accounting Technicians Ireland.

**Signed:** ..... **Position Held:**

**\*Company Name:**

**\*Company Address:**

**\*Company Tel:**

## 8. CHECKLIST

The following checklist should assist you with your work experience requirements:

- (a) Sections **1–6** of application form have been completed by you
- (b) Section **7** of application form has been completed by Employer /Qualified Accountant
- (c) All sections of Record of Work Experience are completed in full and verified by mentor initial and signature where required
- (d) Work Experience assessment fee enclosed

*Please forward this application form along with all relevant work experience documentation to:*

**Member Services Department  
Accounting Technicians Ireland  
47-49 Pearse Street  
Dublin 2**

### **Data Protection Notice**

Accounting Technicians Ireland confirms that it is fully compliant with the General Data Protection Regulation (GDPR) and undertakes to maintain personal data in secure conditions with appropriate technical and organisational measures to protect it from unauthorised access or use. The data held about you will be disclosed to relevant staff and other relevant parties on a need-to-know basis within Accounting Technicians Ireland. All staff are made aware of the procedures they must follow to ensure that your data is appropriately protected.

### **Your Queries**

If you have any queries about this notice or how your data is being processed please contact the Data Protection Advisor by email on [dp@accountingtechniciansireland.ie](mailto:dp@accountingtechniciansireland.ie) or by post Accounting Technicians Ireland, 47-49 Pearse Street, Dublin 2.