

Membership application form

Use this form to apply for individual membership of the Institute of Sport and Recreation Management.

How to apply for membership

Once you have selected which category of membership you would like to apply for, please complete the relevant sections as indicated in section 1. When you have completed the form, please send it, together with any supporting materials, to: ISRM, Sir John Beckwith Centre for Sport, Loughborough University, Loughborough, LE11 3TU Tel: 01509 226474 Fax: 01509 226475.

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What category are you applying to join?

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Category	Please tick	Annual fee	Please complete all sections except
Associate Member		£105.00	5.b) and 5.c)
Member		£105.00	5.a) and 5.c)
Diploma Member		£105.00	5.a) and 5.b)

SECTION

Contact information

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Title: Forename:

Surname:

Date of birth:

Home address:

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..... Postcode:

Home Tel: Correspondence email*:

Handbook email:

Employer:

Job title:

Work address:

.....

..... Postcode:

Work Tel: Work fax:

*This email will appear in the members handbook. If you do not wish this to happen please give a suitable email for the handbook or state 'no email'

Preferred correspondence address:

Home:

Work:

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Equality of opportunity

We are keen to make our services accessible to everyone. It would therefore be helpful if you could answer the following:

Gender (please tick): Male: Female:

Do you consider that you have a disability which affects your normal day to day activities?

Yes: No:

If yes, how does this disability affect your ability to benefit from the services provided by the Institute?

ISRM, its members and those associated with it are committed to promoting equality of opportunity in all areas of the sport and recreation industry and in all aspects of the Institute's business. The following information regarding ethnic origin is required for monitoring purposes (please specify):

- | | | | | | |
|-------------|--------------------------|-----------------|--------------------------|-------------|--------------------------|
| White | <input type="checkbox"/> | Black Caribbean | <input type="checkbox"/> | Pakistani | <input type="checkbox"/> |
| Indian | <input type="checkbox"/> | Black African | <input type="checkbox"/> | Black other | <input type="checkbox"/> |
| Bangladeshi | <input type="checkbox"/> | Chinese | <input type="checkbox"/> | Other | <input type="checkbox"/> |

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Supplementary information for applicants

From page 4 of this document you will have seen the criteria required for the various different grades of ISRM membership. Please decide which category of membership you wish to apply for and ensure that your qualifications and experience are appropriate for that level.

The ISRM will automatically enrol you on its Continuing Professional Development (CPD) scheme (sponsored by Arch Chemicals). CPD is the systematic maintenance, improvement and broadening of knowledge and skills relating to your role. The scheme offers a framework to record evidence and recognition from a lead body that you have completed the CPD programme satisfactorily against specified criteria.

Tick here if you do not wish to participate in this scheme

SECTION

5.a)

- I would like to apply for **Associate Membership**
I have at least **one** of the qualifications below (tick as appropriate)
- ISRM Fitness Management Certificate, **or**
- ISRM National Pool Plant Operators Certificate (ISRM), **or**

SECTION

5.a)

Continued

- ISRM Supervisory Management Certificate, **or**
 - ISRM Event Management Certificate, **or**
 - NPLQ Unit 2 Trainer Assessor, **or**
 - Other Sports Management or Sports Development Level 3 Qualification
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5.b)

- I would like to apply for **Full Membership**

I have at least **one** of the qualifications below (tick as appropriate)

- ISRM City and Guilds Higher Professional Diploma (HPD), **or**
 - Scottish Higher National Certificate/Diploma in Sport and Recreation Management, **or**
 - A level 4 or 5 qualification in a sports or recreation management related subject (eg Foundation Degree in Sports Management or Development; HNC/D Sports or Leisure Management), **or**
 - A sports related ordinary degree (eg BA/BSc Sports Studies; BA Sport Science) **plus** one of the criteria listed below (tick as appropriate)
 - One year work based continuing professional development (CPD), **or**
 - One year work experience in a sport/health/recreation environment, **or**
 - I have successfully submitted a 3000 word project to the ISRM for assessment at level 4
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5.c)

- I would like to apply for **Diploma Membership**

I have at least **one** of the qualifications below (tick as appropriate)

- Edexcel Diploma in Management Studies (DMS), **or**
 - A sports related degree at level 6 (eg BA (Hons) or BSc (Hons) Sports Management or Sports Development; Advanced DMS in Management (Sport and Recreation or Sports Development); MA or MSc in Sports Management), **or**
 - Any other sports related honours degree (eg BA (Hons) Sports Studies; BSc (Hons Sports Science) **plus** one of the criteria listed below (tick as appropriate)
 - Two years work based continuing professional development (CPD), **or**
 - Two years work experience in sport/health/fitness/recreation environment, **or**
 - I have successfully submitted a 5000 word work based assignment for assessment at level 6
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Checklist

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1. To accompany your application please include copies of your qualifications as indicated above.
2. Please provide the signature of a referee below (preferably your line manager) who can verify that you have appropriate experience (if required) for the grade of membership applied for. (Section 7)
3. If you would like to enquire about the submission of a work based assignment please call 01509 226474

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To be completed by referee (checklist item 2)

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I verify that (name of applicant) has appropriate experience as outlined in this document (ie one or two years) to satisfy the criteria for the level of membership applied for.

Name (please print):

Signature:

Position: Date:

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Payment details

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- I wish to pay by direct debit (please complete the attached form). 10% discount for annual direct debit which must be received by January 31.
- I enclose a cheque payable to 'The Institute of Sport and Recreation Management' (or 'ISRM') for the amount of:
£
- I enclose an official order form. Number:
- I wish to pay by credit card/Maestro (see section below)

Address for invoicing

- Please use the work address in Section 2 above
- Please use the home address in Section 2 above
- Please use this address:

Name:

Contact Tel: Organisation:

Address:

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..... Post Code:

