



*International
Federation
of Hospital
Engineering*

*Fédération
Internationale
d'Ingénierie
Hospitalière*

*Federacion
Internacional
de Ingenieria
Hospitalaria*

INTERNATIONAL FEDERATION OF HOSPITAL ENGINEERING MEMBERSHIP APPLICATION

Applications for membership are invited from organizations and individuals interested in contributing to the aims, objectives and activities of IFHE. Categories of membership, criteria for admission and conditions for retention of membership are described in the IFHE Statute, Standing Orders, and Information Sheet. Copies of the latest editions of these documents are available on request.

APPLICATION FOR 'B' ASSOCIATE; 'C' INSTITUTIONAL; 'D' AFFILIATE MEMBERSHIP

The applicant is advised to provide documentation in accordance with stated requirements, to enable thorough consideration of the application. Further information in support of the application may be added.

B. ASSOCIATE MEMBERSHIP APPLICATION FORM

The applicant individual is to submit a curriculum vitae with particular reference to interest and experience in activities in the field of healthcare engineering as broadly defined in the IFHE Statute, Standing Orders, and Information Sheet. The applicant small group is to submit a curriculum vitae, as above, for each individual member of the group numbering up to nine. Additional members of the group are to be listed by name, contact details, occupation and profession. The group shall nominate a convenor to sign the application.

Prospective member's address

name	.....	
postal address	.....	
city/town	.....	state/province	.....
postal code	.....	country	.....
telephone	.....	telefax	.....
		e-mail	.....

Declaration by the applicant:

I/we hereby apply for *B. Associate* membership of the International Federation of Hospital Engineering.
I/we declare that (delete that which is not applicable);
a) I/we reside in a country where there is no 'A' member;
b) I am/we are member(s) of an 'A' member organisation;
c) I/we reside in a country where there is an 'A' member, and I am/we are not member of that or any other 'A' member organisation;
If accepted as a member, I/we undertake to abide by the provisions of the IFHE Statute and Standing Orders, and to promptly remit the annual membership fee, as determined from time to time by Council.

Signed
place.....date.....

C. INSTITUTIONAL MEMBERSHIP APPLICATION FORM

The applicant governmental institution is to submit a description of its function and activities in the field of healthcare engineering, as broadly defined in the IFHE Statute and Standing Orders.

Applicant institutions official address

name	.....	
postal address	.....	
city/town	state/province	.....
postal code	country	.....
telephone	telefax	e-mail	.....

Declaration by the applicant:

We hereby apply for *C. Institutional* membership of the International Federation of Hospital Engineering. If accepted as a member, we undertake to abide by the provisions of the IFHE Statute and Standing Orders, and to timeously remit our annual membership subscription, as determined from time to time by Council.

The officials named below are authorised to sign this application.

Signed on behalf of
 by designated official 1.....title.....
 by designated official 2.....title.....
 place.....date.....

D. AFFILIATE MEMBERSHIP APPLICATION FORM

The applicant corporate body is to submit a description of its area of activity and/or interest in the field of healthcare engineering as broadly defined in the IFHE Statute and Standing Orders, and, if possible, is to provide a copy of its latest annual report.

Applicant organisations address

name	.....	
postal address	.....	
city/town	state/province	.....
postal code	country	.....
telephone	telefax	e-mail	.....

Declaration by the applicant:

We hereby apply for *D. Affiliate* membership of the International Federation of Hospital Engineering. If accepted as a member, we undertake to abide by the provisions of the IFHE Statute and Standing Orders, and to timeously remit our annual membership subscription, as determined from time to time by Council.

The principals named below are authorised to sign this application.

Signed on behalf of
 by designated principal 1.....title.....
 by designated principal 2.....title.....
 place.....date.....