

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | |  | Instruction to your bank or building society to pay by Direct Debit | | | | | | | | | | | | | | | | | |
| **Please fill in the whole form using a ball point pen and send it t:** | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | |
| Institute of Physics & Engineering in Medicine  Fairmount House  230 Tadcaster Road  York  North Yorkshire  YO24 1ES | | | | | | | | | | |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  |  | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | |
|  | **Service user number** | | | | | | | | | | | | | | | | | |
|  | **8** | | **3** | | **0** | | **2** | | **1** | | **7** | |  | |  | |  | |
|  |
| **Name(s) of account holder(s)** | | | | | | | | | | |  | **Reference (if known)** | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | | | | | | | | | | |  | **Instruction to your bank or building society**  Please pay the Institute of Physics and Engineering in Medicine Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with the Institute of Physics and Engineering in Medicine and, if so, details will be passed electronically to my bank/building society. | | | | | | | | | | | | | | | | | |
| **Bank/building society account number** | | | | | | | | | | |  |
|  |  |  |  |  | | |  |  |  |  |  |
| **Branch sort code** | | | | | | | | | | |  |
|  |  |  |  |  | | |  |  |  |  |  |
| **Name and full postal address of your bank or building society** | | | | | | | | | | |  |
| To: The Manager | | | | | Bank/building society | | | | | |  |
|  | | | | | | | | | | |  |
| Address | | | | | | | | | | |  | Signature(s) | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | |
|  | | | | | | Postcode | | | | |  | Date | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | |
| Banks and building societies may not accept Direct Debit Instructions for some types of account  DDI2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

This guarantee should be detached and retained by the payer.

|  |
| --- |
| DdlogolDdlogolThe  Direct Debit  Guarantee |
| * This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits |
| * If there are any changes to the amount, date or frequency of your Direct Debit the Institute of Physics and Engineering in Medicine will notify you 14 working days in advance of your account being debited or as otherwise agreed. If you request the Institute of Physics and Engineering in Medicine to collect a payment, confirmation of the amount and date will be given to you at the time of the request. |
| * If an error is made in the payment of your Direct Debit, by the Institute of Physics and Engineering in Medicine or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society   – If you receive a refund you are not entitled to, you must pay it back when the Institute of Physics and Engineering in Medicine asks you to. |
| * You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us. |

**Direct Debit Application Form:**

|  |  |
| --- | --- |
| **Name:** |  |
| Title: |  |
| First Name: |  |
| Last Name: |  |
|  |  |
| PVRS Ref. No: |  |
|  |  |
| **Home Address:** | *please complete if missing from email or incorrect on email* |
| Line 1: |  |
| Line 2: |  |
| Line 3: |  |
| City: |  |
| County: |  |
| Country: |  |
| Post Code: |  |
|  |  |
| **Confirmation** : | I would like to pay the following: |
| 🞏 PVRS to RCT Transfer Fee by Direct Debit (mandatory) |
| 🞏 RCT Renewal Fee by **MONTHLY** Direct Debit **or** |
| 🞏 RCT Renewal Fee by **ANNUAL** Direct Debit |
| **Payment of the annual renewal fee by direct debit is mandatory. Please ensure that you tick either the monthly or annual payment box above. Applications cannot be processed without this selection being made.** |
| I have read, understood and accept the terms and conditions of paying my annual fees by monthly direct debit shown below |
| Signature:  \* |  |
| Date:  \* |  |
| **\*Mandatory Fields** (Please ensure you use your official signature; typed signatures cannot be accepted) | |

**Terms and conditions of payment of annual fees by monthly Direct Debit**

1. Monthly Direct Debit instalments will be the annual fee divided by 12 and rounded up to the nearest penny.
2. IPEM will collect the monthly Direct Debit instalments on the 8th of each calendar month, or if this is not a working day, the next working day, from the RCT registrant’s bank account.
3. If IPEM is unable to collect any Direct Debit instalment from any RCT registrant’s bank account (bounced DD collection) when it is due, then IPEM will re-present the Direct Debit Instalment collection (usually on the 22nd of the same calendar month) and inform the RCT registrant of this.
4. If IPEM is still unable to collect the DD instalment from the RCT registrant’s bank account after the second attempt, then IPEM will inform the RCT registrant and ask the registrant to pay all the instalments due for the remainder of the year.
5. If an RCT registrant then fails to pay all the instalments due within 30 days the RCT registration status will be marked as lapsed.

**Terms and conditions of payment of annual fees by Annual Direct Debit**

1. IPEM will collect the Annual Direct Debit payment on the 8th day of the month after the transfer to the RCT has been approved, or if this is not a working day, the next working day, from the RCT registrant’s bank account.
2. If IPEM is unable to collect any Direct Debit payment from any RCT registrant’s bank account (bounced DD collection) when it is due, then IPEM will re-present the Direct Debit collection on the next available collection date (usually 22nd) and inform the RCT registrant of this.
3. If IPEM is still unable to collect the DD payment from the RCT registrant’s bank account after the second attempt, then IPEM will inform the RCT registrant and ask the registrant to pay the fee by another method.
4. If an RCT registrant then fails to pay within 30 days then RCT registration status will be marked as lapsed.