

THE INSTITUTE OF BREWING & DISTILLING

Application for CERTIFICATE MEMBERSHIP

(Please read notes on reverse)

To the Registrar of The Institute of Brewing & Distilling,

I seek admission as a Certificate Member of The Institute of Brewing & Distilling under the conditions as described in the notes below. I undertake, if elected, to observe and be bound by the provisions of the Rules and Byelaws of the Institute for the time being in force.

I desire, if elected, to be inscribed in the List of Members of the **Asia Pacific Section** of the Institute (see notes).

Surname (blocks) (Dr/Mr/Mrs/Miss/Ms/.....other).....

Forenames (blocks).....

Qualifications

Address: a. Private

.....

Tel No

b. Business Name:.....

Address:.....

.....

Tel No.....

Fax No :

e-mail address:

The IBD may publish a printed List of Members – if you do not wish your details to be included in this publication please indicate here:

Which address (a) or (b) do you wish against your name in the List of Members?

Date of Passing GCBP

Brief description of current professional position and responsibilities:

.....

.....

.....

Date Signature of applicant

STATEMENTS BY SPONSORS

We, the undersigned, being subscribing (other than Student) Members of the Institute of Brewing & Distilling, certify that:

(name of Applicant)..... is a fit and proper person to become a Member of the Institute and we propose and recommend the Applicant for election.

Name (block).
Address (block)

Class of Membership
Section

Name (block)
Address (block)

Class of Membership
Section

OBJECT OF THE INSTITUTE

