



Application to Pay a Reduced
Subscription 2018

- Please note that reduced subscription rates are not available to Members who are in receipt of any employment or self-employed income, regardless of source.
- I acknowledge that any statement contained herein which is known by me to be false may invalidate this application and any decision reached thereon by the Council of the Irish Tax Institute.

Name _____ Membership No. _____

Address

Telephone No.

Mobile

Email

To be completed by all applicants

I ceased employment on: _____

Reason(s) for seeking a reduced subscription (*please give full details to support your application*)

Please tick

- I confirm that I am not in receipt of any income from any work related source
- I declare that the information contained in this application is true, accurate and complete to the best of my knowledge and belief
- I will notify the institute if I return to work or business, whether on a part time or full time basis. I understand that I will be asked to re-apply to pay a reduced subscription each year
- I understand that if approved, this application does not exempt me from my CPD requirements, including that of making an annual CPD declaration return.

Signature:

Date:

When completed please return this form to:

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