

Application for ACT Middle East membership



Family name: _____ First name(s): _____

Date of birth: _____ Title (Mr, Ms, Mrs, Miss, Dr or other): _____

Preferred name: _____ Company name: _____

Job title: _____

Company address: _____

Company telephone: _____ Company email: _____

Please specify annual company turnover

USD _____ AED _____

Company classification Corporate Financial services Other (Please specify) _____

Are you a member of the ACT? If yes, specify membership category FCT MCT AMCT

Are you an affiliate or faculty member of the ACT i.e. have taken up this option having passed one or more of the ACT's certificates?
If yes, specify

CertICM CertITM CertFMM CertRMP CertRM CertCFF

Are you currently enrolled as a student studying for an ACT qualification? If yes, specify the qualification

MCT AMCT CertICM CertITM CertFMM CertRMP CertRM CertCFF

Tick here if you Do Not want your preferred contact details (as stated above) to be included in the ACT Middle East directory in the members-only section (password protected) of the ACT Middle East website

Signature: _____ Date: _____

All applications for membership of ACT Middle East (ACTME) will be reviewed by the ACT for acceptance. This is to ensure that ACTME membership reflects an appropriate balance of organisations and individuals.

Data Protection – The information you provide will be safeguarded by the ACT.

A delegate list will be produced for ACT Middle East events with details restricted to your name, job title and company. This list may be shared with fellow delegates and event sponsors but we will not disclose it to any other third party. If you do not wish to share this information with fellow delegates or event sponsors, please tick here.
Please note, for security purposes we may be required to disclose your details to the event venue.

The ACT will retain your details on its database in order for us to keep you informed of other relevant products and services. If you do not want to receive this information, please tick here.

By submitting this booking you undertake to have read and accepted the ACT's terms and conditions. For full terms and conditions, visit www.treasurers.org

Please return this form to: ACT Middle East, 51 Moorgate, London EC2R 6BH

Fax: + 44 (0)20 7374 8744 ■ Email: actme@treasurers.org

www.actmiddleeast.org