

**INSTITUTE OF CHARTERED ACCOUNTANTS OF BELIZE
STUDENT MEMBERSHIP REGISTRATION FORM**

Name _____

Date of Birth _____

Current Address _____

Place of Employment _____

Address of Employer _____

Telephone: Home _____ Work _____

E-Mail Address _____

Alternate email address _____

Signature _____ Date _____

ACCA Student ID _____ Date Registered with ACCA _____

An application fee of \$25.00 should be accompanied with your completed registration form. Membership fee is \$50.00. All fees are due and payable on the 1st of January of each year and should be mailed to:

Institute of Chartered Accountants of Belize
Attention: Ms. A. Linda Munoz - Administrator
Secretariat Address
#10 Taiwan Street
P.O. Box 1223, Belize City, Belize

Ph: 223-2455

Web: www.icab.bz Email: secretariat@icab.bz