

## ANNUAL DUES/RECERTIFICATION WAIVER APPLICATION FORM

A. BASIC REQUIREME	NTS	
1. Applicant's Surname:		Other Names:
2. Chapter:		NIPR Practice No(if any):
3. Date or Year of Induct	tion:	<b></b>
4. Current Membership (	Category( <i>Please</i>	e Tick): Fellow Member Associate Graduate
5. Attached Membership	certificate? Yes	s No (If No, decline Waiver)
6. Any other supporting	documents? Yes	s No (If Yes, List attachments below )
R WAIVER OPTIONS/	CATEGORIES /	(Includes cost of Waiver application form)
1. WAIVER ON DUES ON		•
	i. Fellow	( <del>11</del> 95,000)
	ii. Membe	er ( <del>11</del> 65,000)
	iii. Associa	ates ( <del>N</del> 50,000)
	iv. Gradua	ate (\frac{\text{\ti}\}\\ \text{\texit{\texi}\text{\texit{\texi}\text{\texit{\texit{\texit{\text{\texit{\texit{\texi}\text{\texit{\texi}\texititt{\texi{\texi{\texit{\texi{\texi{\texi{\texi{\t
2. WAIVER ON DUES A	AND RECERTIFICA	ATION (Tick as appropriate)
	v. Fellow	(₩115,000)
	vi. Membe	er ( <del>N</del> 85,000)
	vii. Associa	ates ( <del>N</del> 70,000)
	viii. Gradua	ate (\(\frac{\text{\tin}\text{\tetx{\text{\texi}\text{\texit{\texit{\texict{\texit{\tex{\texit{\texi{\texi{\texi{\texi{\texi\texi{\texi{\texi}\tint{\tin}\tint{\tin}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}
Total Amount naid		(Please submit evidence of payment)
Total Amount paid		(Please submit evidence of payment)
		Institute of Public Relations, Account. No: 0005794220
Payment Ref: Name, 2023 W (Scan completed application		tice Number, if available. attachments in one file to : officeoftheregistrarnipr@gmail.com)
C. CHAPTER WAIVER		
		aiver at chapter level? Yes No (If No, suspend process)
2. Amount paid to th	.upter	<del></del>
Recommendation by Chapt	ter: The applicant	t is hereby recommended for waiver
		(Name and Signature for Chapter Chairman with date)
		FOR OFFICE USE ONLY
Verification: Dayment	is verified hv. /R	Bursar)
verification. I ayment	.s verified by. (bt	
Approval: The applicant,	, having met the re	requirements of the special waiver for NIPR members as specified by Council
is this day granted a waiv	ver of all national	dues owed as of December 2023.
Signature and Date of the Reg	aistrar	Signature and Date of the President and Chairman of Council
ga.c aa Date of the heg	y - *· <del>*</del> ··	Ligitation 2 and 2 and 1 restricted and endiring of deather