



# INSTITUTE OF CREDIT MANAGEMENT (KENYA)

Kasneb Towers 1  
Lower Floor,  
Hospital Road, Upper Hill  
P. O. Box 18279, 00100  
Nairobi, Kenya.

Cell:0728 621516  
Email: info@icmkenya.co.ke  
website: www.icmkenya.co.ke

## ICM (K)

### MEMBERS REGISTRATION FORM

*This form should be filled by any person who is willing to become a registered member of the Institute of Credit Management Kenya*

**(A) DETAILS OF APPLICANT**

Full Names of Applicant : \_\_\_\_\_  
Postal Address : \_\_\_\_\_  
Telephone Number-office : \_\_\_\_\_  
Cell Phone : \_\_\_\_\_  
E-mail Address : \_\_\_\_\_

**(B) DETAILS OF EMPLOYER**

Name of employer : \_\_\_\_\_  
Postal Address : \_\_\_\_\_  
Telephone Number : \_\_\_\_\_  
E-mail Address : \_\_\_\_\_  
Position Held : \_\_\_\_\_

**(C) MEMBERSHIP GRADE**

**SUBSCRIPTION FEE**

**Tick one as appropriate**

1. Registration fee **kes 2,000** – one off payment to join ICM (K)
2.  **Associates** **kes 2,000** per year (For registered students with **kasneb** but are yet to graduate)
3.  **Graduates** **kes 5,000** per year (Eligible member must be a graduates of **kasneb- CCP- finalists**)

**Total payments**

**Associates Kes 4,000**

**Graduates Kes 7,000**

- **kasneb** Registration Number \_\_\_\_\_
- Year and Month of Joining **kasneb** \_\_\_\_\_
- Year and month completed \_\_\_\_\_
- Membership Grade Applied for \_\_\_\_\_
- Mode of payment \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**ICM MEMBERSHIP NUMBER** \_\_\_\_\_ **OFFICIAL**

**Empowering the Credit Professional**

**ICM (K) -The habitat for Credit Professionals**



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**ICM (K)**

## (D) NOTES

1. Please attach 1pp size photograph
2. Attach copy of your I/D
3. Attach the kasneb letter from the CEO for completion of CCP course (in the absence of this attach your final certificate or result slip)
4. For ongoing student you just require to quote your kasneb registration number on the Application form
5. Members should familiarize themselves with the code of ethics which should always be adhered to. (refer the ICM website for details)
6. Those wishing to pay physically in exchange of a receipt should get in touch with the ICM Secretary Mr. Joseph Muiruri tel. no. **0722- 635902** in the office at **kasneb towers 1,Lower Ground Floor.**

## (E) PAYMENT METHOD

1. Through Institute of Credit Management -Kenya Bank account – the a/c no. is **1002140221- NCBA Bank – CITY CENTRE BRANCH-** Nairobi.
2. Through NIC Bank Pay Bill Number;
  - a. Go to M-Pesa Pay Bill
  - b. Enter Pay Bill Number: 880100
  - c. ICM-K NIC Bank Account No. 1002140221
  - d. Enter Amount: XXXX
  - e. Then send the M-Pesa payment confirmation message to Council secretary on **0722- 635902**

**APPROVED**

**CHAIRMAN** \_\_\_\_\_ **DATE** \_\_\_\_\_

**SECRETARY** \_\_\_\_\_ **DATE** \_\_\_\_\_

**TREASURER** \_\_\_\_\_ **DATE** \_\_\_\_\_

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