International Council on English Braille  
Application for Full Membership Form

When complete, this form should be sent to the ICEB President via [info@iceb.org](mailto:info@iceb.org).

# About ICEB membership

As per the ICEB Constitution 4.1.1:

(a) Full Membership in ICEB is open to all nations in which English is a major language and/or in which there is a substantial use of English language braille, and which have a national standard-setting body for braille.

(b) When a group of nations is represented by a single standard-setting body, the group of nations may collectively seek membership in ICEB.

As per the ICEB Constitution 4.2:

4.2.1 Full Members have the right to:

(a) send a delegation to the General Assembly;

(b) submit papers to the General Assembly;

(c) propose resolutions at the General Assembly;

(d) vote on any issue put to the General Assembly; and

(e) recommend to the Executive Committee candidates for committee membership; and

(f) be represented on the Executive Committee.

4.2.2 Full Members have the responsibility to:

(a) pay the required annual membership fee by the due date;

(b) submit the names of their delegations to the General Assembly to the President by the due date; and

(c) pay all costs of their delegates to participate in the General Assembly.

As of 2016, the annual subscription fee for Full Membership of ICEB is US$500, payable on the 1st of January each year.

Partial fees can be negotiated until 1 January the following year for members joining mid-year.

# About your Braille Authority

1. Please outline the structure, role and mission of your braille standards-setting body. What type of organisation is it? E.g. Government sponsored, not-for-profit, etc.
2. Why are you interested in joining ICEB?

## Contact details

**Braille authority or standards-setting body**

Name:

Website:

Email:

Address:

**Contact person 1**

Name:

Email:

Address:

Phone:

**Contact person 2**

Name:

Email:

Address:

Phone:

# Declaration

We hereby certify that [*organisation name*] is responsible for setting and/or administering English language braille standards in [*country/countries*].

We hereby declare that we are authorized to act on behalf of [*organisation name*].

We hereby apply for Full Membership of the International Council on English Braille on behalf of [*country/countries*].

We hereby state our willingness to abide by the Constitution, Bylaws and Policies of the International Council on English Braille, as given at <http://iceb.org>.

We hereby affirm our ability to pay the costs involved in ICEB membership, i.e. annual fees and participation at ICEB General Assemblies and mid-term meetings.

Two signatures are required.

Signature:

Name:

Position:

Date:

Signature:

Name:

Position:

Date: