



## Numsa Membership Application Form

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Surname: \_\_\_\_\_ Cell No: \_\_\_\_\_

Address: \_\_\_\_\_

Identity Number: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Male:  Female:

Marital status: Single:  Married:  Never Married:

Rate per hour: \_\_\_\_\_

Working Hours	Per day
	Per week

Choose one: (X)	Permanent	
Par-time	Fixed term	
Casual	Contract	

Name, address, phone number of company where you work: \_\_\_\_\_

Department: \_\_\_\_\_ Job title: \_\_\_\_\_

Job Grade: \_\_\_\_\_ Clock no: \_\_\_\_\_ Contact no. of a friend/relative \_\_\_\_\_

### SIGN THE STOP ORDER FORM BELOW SO YOUR EMPLOYER CAN DEDUCT FROM YOUR WAGES

If you want to join Numsa, then fill the stop order from below. This form instructs your employer to deduct union subscriptions of 1% of your basic wage and send them to:

- Numsa membership department, OR
- If you work for a motor company that falls under Mibco, your company must send your subscription to Mibco PO Box 4616 RANDBURG 2125. Phone 011-369 7500, fax 086 673 3176
- Please also fax your completed form to your Numsa region or to Numsa Head Office – 011 833 6408

### ATHOURISATION FOR DEDUCTION OF NUMSA UNION SUBSCRIPTIONS – STOP

TO: \_\_\_\_\_ (company name)

I, (name and surname): \_\_\_\_\_ ID Number: \_\_\_\_\_

Clock no: \_\_\_\_\_ do hereby revoke my membership with any other trade union and hereby request and athourise you to deduct 1% of my basic wage, this being my subscription to the nation Union of Metal Workers of South Africa (Numsa). This amount may be varied from time to time by the said Union. Such varied amounts will advised to you and deduction therefore is athourised by this stop order. I further request you to submit such deductions to:

- Numsa membership department, via EFT or bank transfer. Phone: 011-689 1700, Fax 011833 6408 for details OR
- Because I fall under Mibco, with the monthly Micfa Returns to Mibco in Randburg.

Cancellation of this stop order will take place in line with the Union's Constitution.

Date joined: \_\_\_\_\_ Signature: \_\_\_\_\_ Union Number: \_\_\_\_\_  
(Official use only)

### FUNERAL BENEFITS – FILL IN YOUR DEPENDANTS SO YOUR FAMILY CAN BE COVERED

As soon as your first stop order is deducted, you, your spouse (life partner) and your children under the 18 are entitled to funeral benefits from Doves. Tell: 0860 11 22 88. For details of the benefits you will receive, ask your shop steward or nearest Numsa office. Give your details, spouse's (life partner) and your children below. You must fill this in. If you don't they cannot receive the funeral benefits. (NB – The funeral scheme does not cover your parents, siblings. Contact Numsa Financial Services (NFS) – 011 873 3578 to get cover)

	Principal Beneficiary	Added Beneficiary 1	Added Beneficiary 2	Added Beneficiary 3
First name				
Middle Name				
Surname				
Gender				
Title				
ID number				
Date of Birth				
Relationship				

**RESIGNATION LETTER FROM THE UNION**

I, .....Sap/Clock

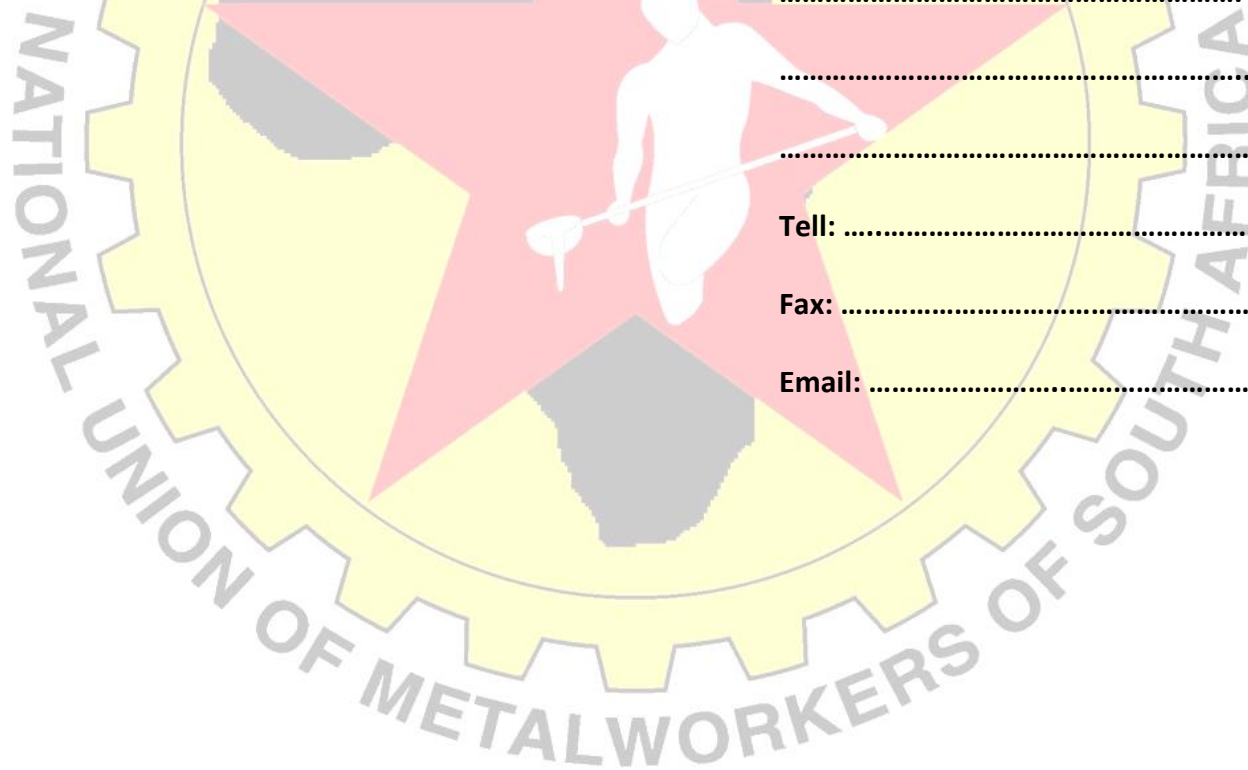
no: .....Hereby resign from.....as

per its constitution and s13 of the LRA. I further would like to inform the company cease any deductions of the aforesaid union after one month notice.

Signature.....Contact Details.....

Date.....ID no: .....

Employer: ..... Address: .....



Tell: .....

Fax: .....

Email: .....