



Membership Application Form

Email completed form to: admin@mecsu.org

SECTION A: MEMBER PERSONAL DETAILS

Title ID Number: Date of Birth:

First Names: Initials:

Surname

Gender M F

SECTION B: CONTACT DETAILS

Address Tel (Work)
 Cell
 Code

Email:

SECTION C: EMPLOYMENT DETAILS

Province Region

Employer Name:

Persal No. Occupation

Pay No.

Work Physical Address
 Code:

SECTION D: MEMBERSHIP SUBSCRIPTION

Payment Method: Debit Direct Deposit Persal/Pay No

If you pay by Debit Order please complete your Banking Details

I hereby authorize **Municipal Employees and Civil Servants Union (MECSU)** to arrange with my bank to collect by means of the debit order system, the payments in terms of the stipulation of the contract and the payments in arrears where applicable of the above mentioned against my account. The reference which will be reflecting on your bank statement will be **Multid for MECSU**. The bank account details to be debited are as follows:

Account Holder Bank Name

Account Type: Branch Number

Recurring Amount R Frequency Monthly Yearly Weekly

Account Number: Debit Date:

SECTION E: DECLARATION BY MEMBER

I (Name & Surname) _____ Persal/Pay No _____ hereby authorise you to deduct 1.31% (not exceeding R85.00) from my monthly salary and credit it into the union account. The deductions, made in respect of my monthly subscriptions, will be in accordance with the current union subscription rate or any amount as determined by union. I hereby revoke any previous authorisation for deductions in respect of any Union or staff association.

Signed at _____ on this _____ Day of _____ 20 _____

X _____
Member signature

FOR OFFICE USE ONLY

Joining Date Membership Number

Recruited By

Designation Contact Number