



**Public And Allied Workers Union
Of South Africa**

The General Secretary

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UNION MEMBERSHIP RETIREMENT CLAIM FORM

SECTION A:

1. Surname:
2. Full name:
3. Date of birth:
4. ID Number:
5. Full Home Address:
6. Date of Retirement/Disability:
7. Full name and address of workplace:
8. Persal Number:

BANK DETAILS OF MEMBER:

- Name of Bank:
- Account Number:
- Type of Account:
- Branch Code:

SECTION B:

- Membership Number:Date of Joining:
- Last Deduction:

<u>OFFICE PURPOSE:</u>	
Membership Confirmed by:.....	
<input type="checkbox"/> APPROVED	<input type="checkbox"/> REJECTED
If rejected- reason thereof	
Authorisation: Date:.....	
Applications must be received within 60 days after date of retirement	
Who qualifies:	
<ul style="list-style-type: none"> Paying members until date of retirement Membership 1 – 5 years be paid R250-00 Membership 5 – 10 years be paid R500-00 Membership of 10 years and more be paid R 1 000-00 	
NB: NO PAYMENT TO MEMBERS WHO RESIGN FROM THE INSTITUTION	

