

For Office Use Only

Date of Admission:

Membership No.

Secretary's Signature:



MEMBERSHIP APPLICATION FORM

I, the undersigned, apply for admission to membership of the United Firefighters Union of Australia Tasmania Branch and undertake that if admitted to membership, I agree to be bound by the Policy, Constitution and Rules of that Union. I further assert that I am willing to assume all rights and liabilities attaching to membership of the United Firefighters Union of Australia Tasmania Branch.

MY DETAILS

Title (Please circle) Mr, Mrs, Miss, Ms

Surname

Given Names

Home Address

Street number & name

Suburb

State

Postcode

Date of Birth

 / /

Home Phone

TFS Email

 @fire.tas.gov.au

Private Email

Mobile Phone

MY WORK DETAILS

Employee Number

Rank

Station

Date Joined TFS

 / /

SIGNATURE OF APPLICANT

DATE

DEDUCTION AUTHORITY

I authorise the Tasmania Fire Service to deduct 1% of my fortnightly salary and forward this amount to the United Firefighters Union of Australia (Tasmania Branch) until further notice. (Please note payments to the Union attract 10% GST)

Signed: _____

Date: _____