

FORM 1A-16311. OFFICE USE ONLY

Membership No.

SECTION A YOUR DETAILS:

NAME: Title:	Surname:	Given Names:	DOB: / /
EMAIL: Home:		Work:	
PHONE: Home:		Work:	Mobile:
HOME ADDRESS:			Postcode:
EMPLOYER:			
WORKSITE ADDRESS:			Postcode:
OCCUPATION:			
EMPLOYMENT BASIS: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Contractor <input type="checkbox"/> Casual <input type="checkbox"/> Apprentice <input type="checkbox"/> Temp <input type="checkbox"/> Seasonal			
* Please circle income threshold: A B C D E F G H I J K L M			
* Please note subscription rates are determined by income thresholds - see rates card (available at www.usu.org.au/our-rates)			

SECTION B APPLICATION FOR MEMBERSHIP:

I, the undersigned, hereby apply for membership of the NSW Local Government, Clerical, Administrative, Energy, Airlines & Utilities Union (trading as the United Services Union - USU) and the NSW Local Government, Clerical, Administrative, Energy, Airlines & Utilities Branch of the Australian Municipal, Administrative, Clerical and Services Union (ASU).

I agree to abide by the Rules of the Union as amended from time to time in accordance with the Fair Work Act 2009 (C'th) and the Industrial Relations Act 1996 (NSW). I hereby authorise the USU/ASU to act as bargaining agent on my behalf with my employer, in all matters affecting my employment with my employer.

I understand my authorisation remains in force until I revoke it in writing in accordance with the Fair Work Act 2009 (C'th) and the Industrial Relations Act 1996 (NSW). I have read the information supplied relating to financial obligations of membership and the circumstances and manner in which I may resign my membership.

Please indicate the name of person who provided this membership form to you.

Name of person:

M'ship No. (if known):

Financial Obligations: Members shall pay subscriptions in accordance with the Rules of the Union.

Resignation: 1. A member may resign membership of the Union by written notice delivered or sent to the registered address of the Union.

2. A notice of resignation takes effect:

- where the member ceases to be eligible for membership of the Union:
 - on the day on which the notice is received; or
 - on the day specified in the notice, which is a day not earlier than the day when the member ceases to be eligible to become a member;

whichever is the later; or
b. in any other case:

- at the end of two weeks after the notice is received, or
- on the day specified in the notice; whichever is the later.

3. Any member resigning shall be liable for the payment of all subscriptions, fines and levies owing to the Union under the Rules at the date of leaving, and such monies may be sued for and recovered in the name of the Union, subject to the Fair Work Act 2009 (C'th) and the Industrial Relations Act 1996 (NSW) or any Act amending the same. *Please note that the New South Wales Local Government, Clerical, Administrative, Energy, Airlines & Utilities Union trades as the **United Services Union**.*

Privacy Statement

Note: The United Services Union is bound by the Privacy Act 1988 (C'th). The Union's Privacy Statement is available by contacting the USU on 1300 136 604 or on the website at www.usu.org.au

SECTION C PAYMENT METHOD (DO NOT DETACH):

PAYROLL DEDUCTION AUTHORITY*

* Where available.

Payroll Number:

I, (print name) authorise (my employer)

to deduct from my salary the sum of \$ per **week/fornight/month** to be deducted from the date of / / and for each

subsequent year and pay such sum to the United Services Union.

I authorise you to accept and act upon any advice from the Union that the amount of the Union subscription, Picnic Ticket or the rate of deduction payable by me has been altered in accordance with the Rules of the Union and that this authority shall extend to cover such alterations.

This authority shall be deemed to remain in full force and effect until written revocation thereof shall be given by me to the Union and to my employer. The receipt by the appropriate Officer of this authorisation shall be sufficient discharge to the employer for the payment of any amount so deducted by you. I authorise the providing of information to the Union of alteration to details provided on this form for employment and related interests in accordance with the Privacy Act 1988 (C'th).

Signature/s:

Date / /