PLEASE ATTACH A PASSPORT-SIZE PHOTO HERE

COMMUNICATION WORKERS UNION

MEMBERSHIP FORM

- Launched 9 May 1996 -

MEMBER PERSONAL INFORMATION

INITIALS AND SURNAME | FIRST NAME

IDENTITY NUMBER | DATE OF BIRTH (Y Y Y Y M M D D)

RACE | GENDER (M F) | MARITAL STATUS | No OF DEPENDANTS

MEMBER ADDRESS INFORMATION

PROVINCE | LOCAL/YARD

RESIDENTIAL ADDRESS | ZIP CODE

TELEPHONE (W) | TELEPHONE (F)

TELEPHONE (H) | E-MAIL ADDRESS

MOBILE (1) | MOBILE (2)

EMPLOYMENT INFORMATION

EMPLOYER NAME | SECTOR

EMPLOYER ADDRESS | ZIP CODE

OCCUPATION | DATE COMMENCE (Y Y Y Y M M D D)

DEPARTMENT CODE | BASIC SALARY /MONTH R

** MEMBERSHIP DETAILS (OFFICE USE) **

RECRUITER DETAILS | RECRUITER SIGNATURE

STOP ORDER FORM

To the company

I,_____ the undersigned hereby authorize and request you to deduct an amount equa to R80,00 and remit such amount as my monthly subscription to the Communication Workers Union (CWU). The first deduction is to be made on the next pay day upon receipt of this stop order. I further hereby cancel with immediate effect any other request I may have made to you, to deduct subscriptions payable to any trade union/association. This stop order can only be revoked by myself giving 30 days written notice to the Union.

Signature | Salary Ref/Clock no | Date: (Y Y Y Y M M D D)