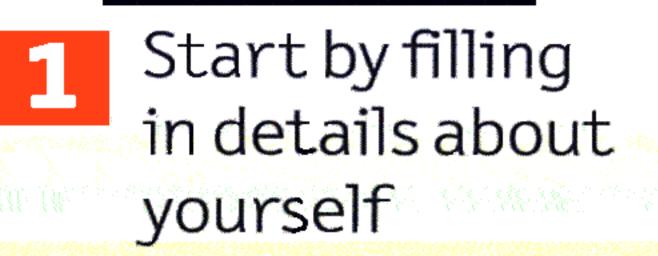


R45 Rhondda Cynon Taff Branch



Then fill in details about yourjob

Then choose how to pay: **EITHER by** deductions from your pay



5

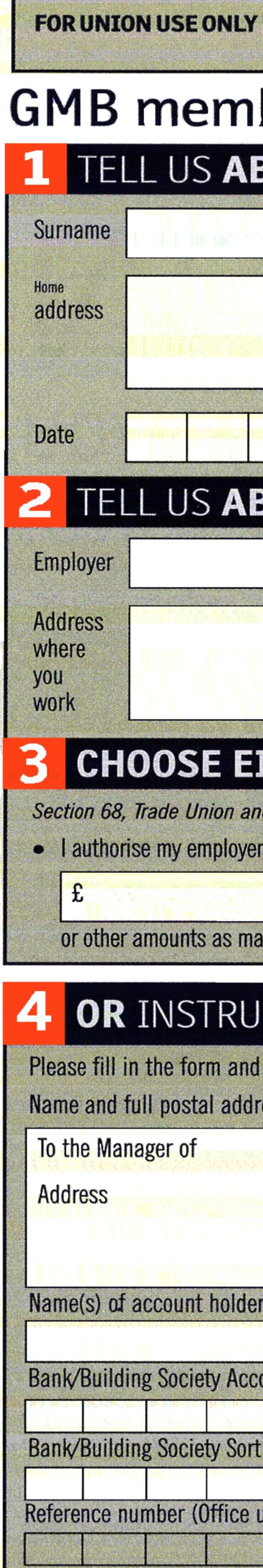
3

OR by Direct Debit from your bank or building society

Hand the completed form to your GMB representative,

orpostit

free to Freepost RRBR-UTLR-YZYY GMB Resource Centre 28e Taff Street Pontypridd **CF37 4TR**



Section Branch No	Members	ship No		
bership applicatior	1 form PLEAS	E USE BLOCI	K CAPITALS	
BOUT YOU				
First name			Title Mrs/Miss/Ms/Mr Da	
	Home Tel		Email	
Postcode	Mobile		I agree to abide by GMB rules Signature	
We ask for your ethnic origins as part of ou Bangladeshi / Black African / Black C			members	
BOUT YOUR JOB				
Your job		Your job		
		How many hours a	a week Pay No	
Postcode		do you work? Work Tel	Pay Date	
nd Labour Relations (Consolidated) Act 1992 as amend or to deduct from my pay each week/month the sum of ay be fixed by the GMB from time to time.	I note that thi	s agreement may be cand	ly and pay the amounts to the GMB. celled by one month's notice in writin tify the GMB of any future change of	
		O BAV DV DT		
JCTION TO YOUR BANK OR BU d send to GMB South Western Region , Williamson ress of your Bank or Building Society branch				
Bank/Building Society		NAME OF A DESCRIPTION OF A	For GMB official use only. This is not part of the in If your A/C number is not available fill in your add	
Postcode	9			
er(s) count Number t Code use only)		Please pay GMB safeguards assu	your Bank or Building Society. Direct Debits from the account det red by the Direct Debit Guarantee. 3 and, if so, details will be passed of	
		Destre es Duilding Conte	tion may not accept Direct Dahit instructions for	

