



SIPTU

Services Industrial
Professional
& Technical Union

Membership Application Form

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SIPTU is committed to the General Data Protection Regulations 2018, and aims to maintain consistently high standards in protecting and securing all of your personal information. Our Privacy Notice can be viewed at www.siptu.ie/privacystatement

PERSONAL DETAILS (PLEASE USE BLOCK CAPITALS EXCEPT FOR SIGNATURES)

First name:

Surname:

Home Address:

Male Female Date of Birth:

Telephone: Mobile Phone No.:

Preferred Mailing Address: Home Work E-mail:

Name of Employment:

Address of Employment:

Industry/Sector:

Occupation:

Date Employment Commenced: _____

Earnings: Per Hour: _____ Week: _____ Month: _____ Annual: _____

Signature: _____ Date:

If also engaged in another employment, please state the name and address of employment: _____

If former or present member of another union, please state union: _____ Date Membership Lapsed:

Please be advised that SIPTU reserves the right to refuse to offer advice and representation on issues which originate prior to the application for membership.

AUTHORISATION FOR DEDUCTION OF UNION CONTRIBUTIONS FROM SALARY

First Name:

Last Name:

I authorise (Name of Employer) _____ to deduct from my wages each week the appropriate amount of Union contributions as set out in the Union Rule Book and to hand over such monies to SIPTU. The amount may be varied by changes in the Registered Rules from time to time. This authority shall be valid for this and subsequent periods of employment. The current applicable weekly contribution rate is £ _____

Signed: _____ Department: _____ Division/Sector: _____ Clock In/No. _____

Union Number: _____ Date: _____