



Address: Level 3, 81 George Street Parramatta NSW 2150 Mail: PO Box 250 Parramatta NSW 2124  
 Phone: (02) 9893 7822 Fax: (02) 9893 7396 Email: admina@cepu.org Web: www.cepu.org

**FINANCIAL OBLIGATION:** Members are required to pay membership fees and levies (if any). CEPU may take appropriate action to recover unpaid monies.

**RESIGNATION:** In accordance with the CEPU Rules, you may resign from the CEPU by written notice to the Branch Secretary. If you are no longer eligible to be a CEPU member, your resignation will take effect on the day the resignation is received, or on any later date specified in the resignation. Else, your resignation will take effect 14 days after the resignation is received, or any later date specified in the resignation. You remain liable for any dues until a resignation takes effect.

**PRIVACY:** The CEPU is bound by the Privacy Act. Information is collected to enable the CEPU to contact you about matters relating to your membership and to ensure that we have the necessary information to represent your employment and related interests. The CEPU's Privacy Statement is available by contacting the Union office. If you do **NOT** wish to receive any communications not related to the CEPU and your employment, please tick this box

**APPLICATION FOR MEMBERSHIP**

REFERRED BY

**EMPLOYEE/AGS/APS NUMBER**  MR  MRS  MS  MISS  **DATE OF BIRTH**  /  /

**FULL NAME** GIVEN NAME/S  SURNAME

**HOME ADDRESS** STREET  SUBURB  POSTCODE

**PERSONAL PHONES** LANDLINE  MOBILE

**EMAIL ADDRESSES** HOME / PERSONAL  WORK

**WORK DETAILS** EMPLOYER / COMPANY  DESIGNATION / CLASSIFICATION / TITLE

**JOB DETAILS** WORKPLACE  SHIFT TIME

**WORK ADDRESS** LEVEL / STREET  SUBURB  POSTCODE

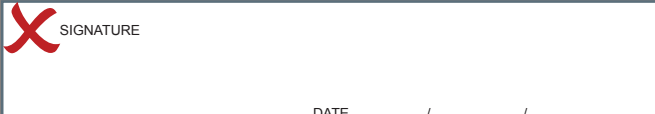
**WORK PHONES** LANDLINE  FAX

**EMPLOYMENT ARRANGEMENT**

Permanent  Casual  Fixed-term  Contractor   
 Greater than 25 hours per week  
 15 - 25 hours per week  
 Less than 15 hours per week

Are you currently a trainee?  
 Yes  No

I hereby make application to be a member of the CEPU NSW Postal & Telecommunications Branch and if accepted, agree to conform to the Rules and any amendments thereof.

 SIGNATURE  DATE  /  /

**PAYMENT METHOD 1 DIRECT DEBIT FROM BANK / FINANCIAL INSTITUTION ACCOUNT**

CUSTOMER'S AUTHORITY DEBITS USING THIS PAYMENT METHOD ARE MADE FORTNIGHTLY

I / WE

Authorise the CEPU NSW Postal & Telecommunications Branch, APCA User ID 064116, until further notice in writing, to arrange for funds to be debited from my/our account at the financial institution identified below and as prescribed below through the Bulk Electronic Clearing System (BECS). This authorisation is to remain in force in accordance with the terms described in the 'Service Agreement' (the rules of the CEPU). I/We understand that the User may, by prior arrangement and advice to me/us, vary the amount of future debits in accordance with the CEPU rules.

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 BSB NUMBER ACCOUNT NUMBER BANK / FINANCIAL INSTITUTION NAME

 DATE  /  /   
 ACCOUNT HOLDER SIGNATURE / DATE

 DATE  /  /   
 ACCOUNT HOLDER SIGNATURE / DATE

**PAYMENT METHOD 2 DIRECT DEBIT FROM CREDIT / DEBIT CARD ACCOUNT**

CREDIT CARD DETAILS

Mastercard  Visa  DEBIT FREQUENCY: QUARTERLY Jan, April, July, Oct  BI-ANNUALLY Jan, July  ANNUALLY (10% discount applies) July

CARD NUMBER EXPIRY DATE  /

I authorise the CEPU NSW Postal & Telecommunications Branch to debit from my credit card the amount of my CEPU dues, and future dues as prescribed from time to time under the rules of the CEPU. This authorisation is to remain in force until revoked by the CEPU or cancelled by me in writing.

CARD HOLDER FULL NAME

 DATE  /  /   
 CARD HOLDER SIGNATURE / DATE