



Registration number: LR2/6/2/3205

DYNAMIC PEOPLE'S UNION OF SOUTH AFRICA (DYPUSA)

Tel : 011 242 3880  
WhatsApp: 060 461 8814  
Fax: 086 474 6043  
Email: admin@dypusa.org  
Website: www.dypusa.org

DYPUSA House  
NO. 4 Henri Street  
Braamfontein  
Johannesburg  
2001

## MEMBERSHIP APPLICATION FORM

### UNION MEMBERSHIP INCLUSIVE FUNERAL INSURANCE

As part of your DYPUSA membership and subscription fee, you will receive funeral cover in accordance with the Policy terms and conditions as agreed to between DYPUSA and the Insurer, a copy of which will be provided to you at inception of your funeral cover.

#### MEMBER'S DETAILS

(All official communication and policy information will be sent to these contact details)

Province:

Union Sector:

Surname:

Name:

Identity Number:

Gender:  M  F

Home Address:

Postal Code:

Cell Number:

Alternative Tel No:

Email Address:

#### COMPANY DETAILS

Company Name:

Company Postal Address:

Postal Code:

Company Tel No:

Company Fax:

Employee/Clock Number:

Station/Depot:

Email Address:

#### NOMINATED BENEFICIARY (to whom the funeral benefits are paid)

Beneficiary Surname:

Beneficiary Name:

Relationship to Applicant:

Cell Number:

#### PERSONAL INFORMATION

DYPUSA may use Personal Information, including Special Personal Information, about me, as defined in the Protection of Personal Information Act, that DYPUSA lawfully obtained in the past, future or as part of this Application to:

- consider applications for membership;
- facilitate administration of my union membership or to satisfy contractual obligations;
- to market the services of the union or its service providers to me; and
- to insure my life under a Group Funeral Insurance Policy.

DYPUSA may also share my Personal Information, as stated herein, with the Insurer and the Administrator of the Group Funeral Policy, who in turn may process my Personal Information in the manner set out in the Group Funeral Policy Terms and Conditions as stated by the Service Provider.

#### STOP ORDER AUTHORISATION

I, the undersigned, hereby authorise my employer to deduct from my basic wage or salary, subscription or levies payable by me to the DYNAMIC PEOPLE'S UNION OF SOUTH AFRICA or its successor in title ("the union") in terms of Section 13 of the Labour Relations Act No 66 of 1995, as amended ("LRA"). The amount of the union's subscription that I authorise the employer to deduct from my basic wage or salary is R150 per month. I also authorise the employer to deduct from my wages or salary and pay over to the union, any other levies that the National Executive Committee of the union may decide upon.

The employer is required to pay all subscriptions and levies deducted from my wages or salary to the union's head office whose address appears above, by no later than the 7th day of the month, following the date each deduction was made. The union may change the subscription fee rate from time to time. I hereby authorise the employer to provide the union with any information that is requested by the National Executive Committee of the union, including any information relating to my employment and membership of the union.

If I cancel this authorisation as a result of my resignation from the union, then I agree that the cancellation of this authorisation will only become valid (a) four weeks after I or my employer having provided the union with written notification of my resignation from the union; and (b) after I have complied with all relevant provisions of the union's constitution.

I hereby terminate any other authorisation of the employer in terms of Section 13 of the LRA to deduct from my wages or salary subscription or levies for any other trade union.

Member Signature

Date



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## MEMBERSHIP APPLICATION FORM

### RESIGNATION OF FORMER TRADE UNION

Resignation from   
(name of the Trade Union from which I resign) as a member.

I, (Full Names):

ID Number:

Employee/ Pension/Clock number:

Company:

do hereby resign as Member of aforementioned Trade Union and accordingly instruct my employer to stop subscription fees deductions from my monthly salary with immediate effect having regard to section 13 of the Labour Relations Act.

I hereby confirm and declare that I have joined DYPUSA as a Member.

**Member Signature**

**Date**

The undersigned commits to abide by the constitution, policies and the decisions of DYPUSA. I further commit to be loyal to DYPUSA and not to bring the union into disrepute in any way.