

Health Workers Union Membership Application

Office use only
Membership No.
Amount to be deducted: \$

Title: (Tick One) Mr Mrs Miss Ms **Referred by:**

Surname:

First Name(s):

Home Address:

Suburb: **Postcode:**

Mobile: **Home Phone:**

Email:

DOB: / / **Classification:**

Company/Site: **Department:**

Payroll Deduction Authority

Please enrol me as a member of the Health Services Union Victoria No.1 Branch, trading as the "Health Workers Union" ("the Union"). I pledge myself to comply with the Rules of the Union and any amendments duly made to the same in accordance with the *Fair Work* (Registered Organisations) Act 2009(Cth). I am aware that the financial obligations arising from membership and the circumstances and manner which a member may resign are set out in the Rules of the Union which are available for inspection at the office of the General Manager of the Fair Work Commission or by appointment at the Union Office at Level 5, 222 Kings Way, South Melbourne. I want my details kept by the Union to be included in offers of products and services made to members by or on behalf of the HWU.

I hereby authorise the employer or any successor or transferee of the employer to deduct from my wages the membership contributions as determined from time to time by the Union and remit same to the Union and to provide to the Union updated personal information relevant to my membership. This authority will remain in force for so long as I remain an eligible employee and a member of the Union.

I understand that the Union is collecting my personal information set out in this form to enrol me as a member of the Union, to provide information, assistance, referrals and other services in relation to my employment and membership of the Union, and to arrange for my employer to deduct membership contributions from my wages.

I authorise the Union to provide this form to my employer (including any successor or transferee) for the purpose of enabling deduction of membership contributions from my wages.

The Union's full Privacy Policy which sets out the purposes for which personal information is collected/held, used and disclosed can be found at www.hwu.org.au

Signature: X

Date: / /

Membership Fees as at 01/01/15	Per Week
Full time/part time (25+ hours per week)	\$11.10
Part-time/casual (25 hours or less)	\$8.85
Casual/casual bank (zero hours per week)	FREE
Student	FREE

