

ASSOCIATION OF MINEWORKERS AND CONSTRUCTION UNION

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Membership No:

Membership M

Northern Cape

(Mr/Mrs) Surname:

APPLICATION FOR MEMBERSHIP AND STOP ORDER AUTHORISATION FORM

I hereby apply for AMCU membership. I without reservation authorise the Company to deduct from my monthly basic salary an amount equivalent to 1% as the subscription fee, or such further amount as the National Congress may determine and pay to the account designated by the NEC.

Employer:

Address:
Area Code
Tel No.(W):
Fax No:
☐ Coy No:
Occupation:
Engagement Date:
Date:
EDGMENT OF STOP ORDER
stop order and confirm that it is complete. n (7) days, the Union will assume that the stop order has been
Occupation:
Occupation:
Date: