

Membership Application Form

Occupation Grade/Band Empl	Postcode
Occupation Grade/Band Empl Work Location Address Please indicate which address should be used for delivery of NIPSA voting papers: Home Work Phone: Personal Email: Personal	oyer
Work Location Address Please indicate which address should be used for delivery of NIPSA voting papers: Home Work Phone: Personal Email: Personal	
Please indicate which address should be used for delivery of NIPSA voting papers: Home Work Phone: Personal Email: Personal	Postcode
Phone: Personal Email: Personal	
Phone: Work Email: Work	
	ou previously been Yes No ber of NIPSA?
If yes, reason for leaving Resigned Left Service Career Break	Employer
Have you been a member of any other union? Yes	
If yes, please answer the following questions. Name of Union	Date of Resignation
I declare to the best of my knowledge the answers to the above questions are correct. If my application is accepted, I at the deduction from my salary of the appropriate subscription.	igree to abide by the <i>rules of NIPSA</i> and authoris
Signature	

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I authorise the deduction from my salary, until further notice the appropriate subscriptions to be paid to NIPSA. I also agree that if the subscription should be varied the deduction should be varied accordingly.

Employer	Full Payroll No.	NI Number
Work Location Address		Postcode
Signature	Date	