



Application for Membership  
of  
the United Firefighters Union of South Australia Inc

I.....  
(full name – please print)

Of.....  
(address – please print)

Date of Birth.....

Mobile .....- .....-.....      Email – Private .....

Email – Work .....

Hereby apply for membership of the United Firefighters Union of South Australia Incorporated  
(the Union).

Signature.....

Date.....

Please email this application to [info@ufusa.com.au](mailto:info@ufusa.com.au)

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**AUTHORITY FOR DEDUCTION OF UNION SUBSCRIPTIONS  
FULL TIME**

**TO: THE HONOURABLE THE TREASURER OR THE CHIEF EXECUTIVE**

I, \_\_\_\_\_  
(Full name in block letters)

of \_\_\_\_\_  
(Address)

SUBURB \_\_\_\_\_ POST CODE \_\_\_\_\_

PAY NO \_\_\_\_\_ STATION \_\_\_\_\_

**HEREBY AUTHORISE** you to pay to the **UNITED FIREFIGHTERS UNION OF S.A. INC.** hereinafter called "the union" of which I am a member, the sum of **\$41.00 per fortnight** (hereinafter called "the subscription") out of any wages or salary due or becoming due to me by my employer **SA METROPOLITAN FIRE SERVICE provided:**

1. that this authorisation may be cancelled by me upon my subsequent written authority.
2. that where the rates of subscription are varied by the union in accordance with its rules the amount of subscription may be varied by you accordingly following receipt by you of notice in writing or electronically from the union of such variation.
3. in the event that I cease at anytime to be a member of the union I shall notify the relevant payroll section of the date from which this authorisation shall cease.

**SIGNATURE** \_\_\_\_\_

**DATE** \_\_\_\_\_

**Notes**

- Note 1 This form must be personally signed by the employee (not by an agent). Deduction will only occur where the original of this form duly signed is forwarded to the relevant payroll section.
- Note 2 This form must be personally signed by the employee (not by an agent).
- Note 3 Regular fortnightly or monthly deductions only to be made according to the relevant pay period.
- Note 4 Unions are to advise departments of variations in scales of rates of subscriptions prescribed by union rules.
- Note 5 Unions are to comply with department procedure after timely advice.
- Note 6 Departments are to pay unions fortnightly or four-weekly and to supply a reconciliation of total subscriptions deducted where required.

Original to be forwarded to relevant Pay Section

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Identity or Pay No.	Dept No.	Closing Date	Period No.	Union Ref. No.	Fund Code	Reason Code	Duty Stamp
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