

Membership Application Form

☐ Amalgamated Union of Public Employees (\$117/year)

☐ Hospitalisation Benefit

☐ AUPE Credit Co-operative

☐ AWS-H at (\$24/year)
For union members only

☐ HPlus at (\$84/year)

Please tick accordingly. You can tick more than one.

Personal Particulars

NRIC/FIN Number

Full Name (as in NRIC/Passport)
(Please underline Surname/Family name)

Name to be Printed on Card
(Max. 26 letters with spaces)

Date of Birth (dd/mm/yyyy)

/

/

Gender

☐ Male

☐ Female

Race

☐ Chinese

☐ Malay

☐ Indian

☐ Others: _____

Residential Status

☐ Singapore Citizen

☐ Permanent Resident

☐ Employment Pass Holder

☐ Work Permit Holder

Marital Status

☐ Single

☐ Married

☐ Widowed/Divorced

Highest Education Level

☐ Primary

☐ Secondary

☐ Nitec/Higher Nitec

☐ Diploma

☐ Degree

☐ Post Graduate

Contact Details

(H)

(O)

(HP)

Email

Residential Address

Blk/House No.

Unit No. #

-

Street Name

Postal Code

Job

Designation

Organisation

Date Joined Service:

/

/

Monthly Gross Salary

☐ Below \$1,500

☐ \$1,500 - \$2,499

☐ \$2,500 - \$3,499

☐ \$3,500 - \$4,500

☐ Above \$4,500

For Credit Co-operative Membership

If admitted, I hereby authorized my employer to deduct the following from **my salary** in accordance with the By-Laws of the AUPE Credit Co-operative Ltd (hereinafter referred to as “ACC”) or any other payments including loan repayments, or by interbank GIRO if check-off facility is not available:

- (a) \$5/- Entrance Fee (once only)
- (b) \$25/- for twenty-five (25) shares valued at \$1/- each (once only)
- (c) \$10/- per month for Subscription Account
- (d) Savings Deposit (min. \$10): \$ _____ per month

I hereby declare that I am neither an undischarged bankrupt nor am I under any debt repayment scheme under the Bankruptcy Act.

I acknowledge and agree that the dividend earned from my shares and subscription will be credited into my ACC Savings Deposit account.

Declaration of Individual Tax Residency

Country/Jurisdiction of tax residence

Taxpayer Identification No. (TIN)*

*For Singaporeans & Singaporean PRs, your TIN is the same as your NRIC no. If you do not have a TIN, please inform the Co-operative.

I certify that I am the Account Holder of all the account(s) to which this form relates. I acknowledge and understand that the information contained in this form is collected and kept by the Co-operative for the purpose of exchange of financial account information; and information regarding the Account Holder and any Reportable Account(s) may be reported to the Inland Revenue Authority of Singapore and exchanged with tax authorities of another country /jurisdiction in which the Account Holder may be tax resident pursuant to the international tax compliance agreements to exchange financial account information under the Income Tax Act.

I hereby declare that the information furnished by me are true and accurate and that if there is any change, I will inform the Co-operative immediately.

Nomination of Beneficiary for AUPE & AUPE Credit Co-operative

I hereby appoint:

Name:

NRIC:

Relationship:

Contact:

Name:

NRIC:

Relationship:

Contact:

to be my beneficiaries in the event of my death under the conditions laid down in the Regulations of the prevailing Welfare Schemes and/or Sections 26 and 45 of the Co-operative Societies Act.

Witness 1

Witness 2

Name:

NRIC:

Signature:

Name:

NRIC:

Signature:

Terms & Conditions

By signing on this application form, I agree to all prevailing terms and conditions as stated in Page 14 of the AUPE Membership Booklet and Nomination of Beneficiaries.

Signature

Date

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Recruiter's Name

Recruiter's NRIC

Union Membership

Membership Type: GB / OB

Branch Code: _____

Membership No.: _____

Joined date: _____

Credit Co-operative

Membership No.: _____

Date: _____

☐ Approved ☐ Not approved

Secretary (For Board of Directors)

Signature

Date

Terms & Conditions for Membership Application

For Union Membership

NTUC reserves the right to assign successful applicants to an NTUC affiliated union/association. Upon approval, all members will automatically become a member of NTUC Club and NTUC FairPrice. I certify that all information provided by me is true and correct.

I agree to:

- Authorise NTUC or its Agency to obtain NTUC Membership Fees [current fees being \$9 per month (Jan-Nov); \$18 (Dec)] from me in accordance with the prevailing rates of Union/Association subscriptions.
- Observe all rules and regulations of NTUC, its affiliated unions/associations, NTUC Social Enterprises, by-laws of NTUC's cooperatives, and terms and conditions relating to membership benefits and programmes.
- Authorise NTUC and its affiliated unions/associations to assign and transfer my membership depending on eligibility and work status.
- Make a payment of \$3.00 to NTUC Link Pte Ltd for any loss or replacement of NTUC Card.
- Give 3 months' notice for termination of membership in writing.

NTUC FairPrice Membership

I understand that I will be **automatically enrolled** into NTUC FairPrice membership administered by NTUC FairPrice Co-operative Limited ("NTUC FairPrice") and that I will be eligible for NTUC FairPrice Cash Rebate ("rebates") that are distributed annually. Under the "Join-Now-Pay-Later" scheme, the first \$23 of rebates accumulated will be used to pay for the 20 shares (at \$1 each) and \$3 admin fee. I hereby authorise NTUC FairPrice to credit my rebates into the bank account that I have provided*. I consent to NTUC disclosing my personal particulars to NTUC FairPrice for the purpose of facilitating my NTUC FairPrice membership. I acknowledge that the maximum amount in purchases at NTUC FairPrice outlets entitled to rebate each financial year is \$6,000 – the rate will be declared at the Annual General Meeting of NTUC FairPrice Cooperative Limited each year.

* The FairPrice rebates (\$) will be paid to the same bank account if your membership fees is paid via GIRO.

For Credit Co-op Membership

I agree to be bound by the Co-operative's By Laws and amendments made thereto from time to time.

For Union & AUPE Co-op Memberships

Collection, Use and Disclosure of Personal Data

1. I consent to my personal data being collected, used and retained by NTUC, AUPE, AUPE Credit Co-operative Ltd (ACC) and/or AUPE General Services Co-operative Ltd (GSC) for the purposes of processing, administering and managing my respective memberships.
2. I acknowledge that the collection, use and/or disclosure of my NRIC/FIN number is necessary to accurately establish my identity to a high degree of fidelity in relation to "NTUC Gift", the Union Training Assistance Programme (UTAP) and an array of other services provided by the NTUC, AUPE, ACC and/or GSC, including but not limited to financial-related matters, legal consultation, job placement and education grants.
3. I consent to my personal data being disclosed amongst:
 - (a) NTUC, AUPE, ACC and/or GSC of which I will be a member for the purposes of managing my respective memberships; and
 - (b) NTUC, AUPE, ACC and/or GSC, the Employment and Employability Institute, and NTUC Social Enterprises for the purposes of managing and increasing membership benefits and privileges.
 - (c) I confirm that my beneficiary(ies) is/are aware of and consent(s) to AUPE and/or ACC and/or any party authorised by AUPE and/or ACC, collecting, retaining and managing his/her/their personal data for authorised purposes.
4. I consent to be contacted by NTUC, AUPE, ACC and/or GSC via email, text messages, call and/or post for matters relating to employment and employability, industrial relations, training and education, social and recreation, AUPE co-op matters as well as to give my opinion/feedback on such matters.
5. For the purposes of industrial relations and employment-related issues, I consent to NTUC and AUPE obtaining my personal data and any relevant data relating to my employment from my employer..
6. I will also keep NTUC, AUPE, ACC and/or GSC informed immediately of any changes to my employment status or personal particulars that affect my membership status and benefits.
7. I understand that I am also applying for membership to the Link Rewards Programme ("Link") administered by NTUC Link Private Limited ("NTUC Link"). I agree to abide by the terms and conditions of Link

I acknowledge and consent to: -

- a) the collection, use and retention of my personal data by NTUC Link for the purposes of fulfilling, servicing and managing my Link membership;
 - b) the disclosure of my personal data between NTUC/union/association and NTUC Link for the purposes of processing, servicing and managing my Link membership;
 - c) the disclosure of my personal data by NTUC Link to its Linkpoints Partners/Merchants for the purposes of fulfilling, servicing and managing my Link Membership;
 - d) I further consent to be notified by NTUC Link on benefits and privileges pertaining to Link via email, text messages, calls; and
 - e) visit www.link.sg to manage my Link membership (including withdrawal of consent) after my successful enrolment to Link!
8. For any enquiries on personal data protection matters, please email to generalsecretary@aupe.org.sg.

By signing on the membership application form, I have agreed to all prevailing terms and conditions as stated above.



Postage will be paid by addressee For posting in Singapore only

Application for Interbank Giro

for Union Membership (@ \$117/year)

Part 1: For Member's Completion

To ☐ POSB ☐ DBS ☐ OCBC ☐ UOB
☐ Other Bank _____

Name of Billing Organisation NTUC - UMS

NRIC/FIN Number _____

Member's Name

- a. I/We hereby instruct you to process the BO's instructions to debit my/our account.
b. You are entitled to reject the BO's debit instruction if my/our account does not have sufficient funds and charge me/us a fee for this. You may also at your discretion allow the debit even if this results in an overdraft on the account and impose changes accordingly.
c. This authorisation will remain in force until terminated by your written notice sent tomy/our address last known to you or upon receipt of my/our address last known to you or upon receipt of my/our written revocation through the BO.

Name of A/C Holder

My/Our Account Number

NRIC/FIN of A/C Holder _____ Contact _____

My /Our Signature(s)
(Account Holder)

My /Our Thumbprint(s)
(Account Holder)

** (As in Bank's Records) For all banks other than POSB/DBS thumbprints should be affixed in the presence of the bank officer.*

For Official Use Only

Part 2: For Billing Organisation's Completion

Bank

Branch

Billing Organisation's Account Number

71710010010648110

Bank

Branch

Account Number To Be Debited

Billing Organisation's Member's Reference Number

Member's Union

Part 3: For Bank Completion

To: NTUC-UMS c/o NTUC Members' Hub
No.1 Marina Boulevard #B1-01 One Marina Boulevard Singapore 018989

This application is hereby REJECTED (Please tick) for the following reason(s):

☐ Singature/Thumbprint# differs from Bank's records

☐ Account operated by signature/ thumbprint#

☐ Signature/Thumbprint# incomplete/unclear#

☐ Wrong Account Number

☐ Others

☐ Amendments not countersigned by the customer

Name of Approving Officer

Authorised Signature

Date

For thumbprint, please go to the branch with your identification * Please delete if not applicable

Application for Interbank Giro

for Hospitalisation Benefit (AWS-H at \$24/yr / HPlus at \$84/yr)

Part 1: For Member's Completion

To ☐ POSB ☐ DBS ☐ OCBC ☐ UOB
☐ Other Bank _____

Name AUPE General Services Co-operative Ltd

NRIC/FIN Number _____

Member's Name

- a. I/We hereby instruct you to process the BO's instructions to debit my/our account.
b. You are entitled to reject the BO's debit instruction if my/our account does not have sufficient funds and charge me/us a fee for this. You may also at your discretion allow the debit even if this results in an overdraft on the account and impose changes accordingly.
c. This authorisation will remain in force until terminated by your written notice sent tomy/our address last known to you or upon receipt of my/our address last known to you or upon receipt of my/our written revocation through the BO.

Name of A/C Holder

My/Our Account Number

NRIC/FIN of A/C Holder _____ Contact _____

My /Our Signature(s)
(Account Holder)

My /Our Thumbprint(s)
(Account Holder)

** (As in Bank's Records) For all banks other than POSB/DBS thumbprints should be affixed in the presence of the bank officer.*

For Official Use Only

Part 2: For Billing Organisation's Completion

Bank

Branch

Billing Organisation's Account Number

9496009400004254

Bank

Branch

Account Number To Be Debited

Billing Organisation's Member's Reference Number

Part 3: For Bank Completion

To: AUPE - ASN C/o AUPE Membership Department
Wisma AUPE 295 Upper Paya Lebar Road Singapore 534929

This application is hereby REJECTED (Please tick) for the following reason(s):

☐ Singature/Thumbprint# differs from Bank's records

☐ Account operated by signature/ thumbprint#

☐ Signature/Thumbprint# incomplete/unclear#

☐ Wrong Account Number

☐ Others

☐ Amendments not countersigned by the customer

Name of Approving Officer

Authorised Signature

Date

For thumbprint, please go to the branch with your identification * Please delete if not applicable