SINGAPORE AIRLINES STAFF UNION

Airline House, SIN ÅLH 05-A, 25 Airline Road, Singapore 819829. Tel: 6541-6090/97 Fax: 6545 9221

APPLICATION FOR ORDINARY BRANCH (OB) MEMBERSHIP

Membership Monthly Subscription: \$117 per year (current fees being \$9 per month (Jan-Nov); \$18 (Dec)) in accordance with the prevailing rates. (Please note that there will be 2 months subscription fees deducted during the first month for processing purposes)

Entrance Fees: \$25 (One-Time)	birsk socialiti below:	
Please return the completed form to SIASU O	ffice, Airline House 05-A	Namonttonio
Section A (Personal Particulars and Job Deta	ails)	Arean Willer Heater
Name as in NRIC/ Passport:	fine into line to be it been to	
NRIC/ FIN Number (Starting with F or G):		Staff Number:
Nationality:	Race:	
Company: SIA/SIAEC/ESA	Date of Birth:	recitions to of the Palebulle USAP bear OUTS In Section 7 has been selected bearing a secretary
Date Joined Company:	Division:	properties the parties of consequence of the second of the consequence of the consequence of the second of the consequence of t
Email (Office):	Designation:	waten in the model of the Amile encountries of
Alternate Email (Optional):	Office Number:	citizantesi bosmetel UZAIS tipa (AFTA franci ndig tipa) — si pilipandi has potetti pis godinara
Highest Educational Qualification:	a to the PLUS Program administrated by the content of the content	Allocations on provides eats part last to Copelian in the last terminate in the contract of th
Mobile Number:	Marital Status: Sir	ngle/ Married
Gender: Male/Female	Are you a membe	er of another Union/GB: Yes/No
Home Address:		
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Postal Code:	I filmi poloining spolitina has allement a ra koastivitin phibitani oldane void Ci.	
Postal Code: Section B (NTUC Membership Card /	Application – Not applicable	if you already have a U Card)
Postal Code:	Application – Not applicable	if you already have a U Card)
Postal Code: Section B (NTUC Membership Card A Please attach your passport sized colour	Application – Not applicable	if you already have a U Card)
passport sized colour photograph here Please write your name and NTUC/FIN number	Freeh Haras of Applicants Soft Hundber Oates y salary as a conjugate of shall block of conjugate on the shall block of conjugate of shall block of conjugat	if you already have a U Card)

Revised 10/02/2023

Above \$4500**

AMPTAM	I would like to be an NTUC FairPrice member under the "Join-Now-Pay-Later" scheme. The first \$23 of rebates must be accumulated within the first three years to pay for the 20 shares (at \$1 each) and \$3 admin fee.
(Tick to select)	I authorise NTUC FairPrice to credit my NTUC FairPrice rebates into my bank account. I consent to NTUC & SIASU disclosing my personal particulars to NTUC FairPrice for the purpose of facilitating my NTUC FairPrice membership.
	I also understand that the maximum amount in purchases at NTUC FairPrice Cooperative Limited entitled to rebate each financial year is S\$6,000 - the rate will be declared at the Annual General Meeting of NTUC Fairprice Cooperative Limited each year.
The FairPrice R	debates will be paid to your bank account below:
Name of Bank	A PO exercit units A watter (1961) of exercit hat interest and courted an
Account Holde	r Name:
AccountNumb	er:
Section C (Te	erms & Conditions – To be read and given consent by applicant)
I consent to my membership.	personal data being collected, used and retained by SIASU for the purposes of processing, administering and managing my Union
I acknowledge to degree of fidelith financial subside	that the collection, use and/or disclosure of my NRIC/FIN number is necessary to accurately establish my identity to a high ty in relation to "NTUC Gift", a group insurance policy exclusively for members of NTUC affiliated unions and associations; lies for skill upgrading and training under the Union Training Assistance Program (UTAP) and an array of other services including to legal consultation, job placement and education grants.
	personal data being disclosed amongst
	I SIASU of which I will be a member for the purposes of managing my respective membership; and ASU, the Employment and Employability Institute, and NTUC Social Enterprises for the purposes of managing and increasing
membersh	nip benefits and privileges. contacted by NTUC and SIASU via email, SMS, calls and/or post for matters relating to employment and employability, industrial
relations, training	ng and education, social and recreation as well as to give my opinion/feedback on such matters.
For the purpose relevant data re	es of industrial relations and employment-related issues, I consent to NTUC and SIASU obtaining my personal data and any elating to my employment from my employer.
6. I will also keep I that may affect it	NTUC and SIASU informed immediately via siasu@ntuc.org.sg.of any changes to my employment status or personal particulars my membership status and benefits.
7. I understand tha	at I am also applying for membership to the PLUS! Program administered by NTUC Link Private Limited. I agree to abide by the itions of PLUS! I acknowledge and consent to:
(a) The collect Membershi	tion use and retention of my personal data by NTUC Link for the purposes of fulfilling, servicing and managing my PLUS! ip.
(b) The disclos	sure of my personal data between NTUC/Union/association and NTUC Link for the purposes of processing, servicing and my PLUS! Membership;
	sure of my personal data by NTUC Link to its LinkPoints Partners/Merchants for the purposes of fulfilling, servicing and managing Membership;
	nsent to be notified by NTUC Link on benefits and privileges pertaining to PLUS! Via email, SMS, calls and/or post; and
	www.plus.com.sg to manage my PLUS! Membership (Including withdrawal of consent) after my successful enrolment to PLUS!
	s on personal data protection matters, please email to <u>siasu@ntuc.org.sg.</u>
Section D (M	onthly Subscription Payroll Deduction)
To: Payrolls, Fina	ance From: Name of Applicant:
	Staff Number:
Through SIASU	Date:
nenceforth until furt	you to deduct from my monthly salary all such membership fees payable by me and remit the same to SIASU ther notice. If I wish to stop such deduction at any time, I shall inform you in writing through my union giving you 3 office. The deduction shall ceases as advised by my union. I declare that the information within this application form e and that I have read, understood and hereby consent to all the terms & conditions contained in Sections A to D
	Signature