

APPLICATION FOR MEMBERSHIP



AND DEBIT ORDER INSTRUCTION

Bus registered name		CIPC number	
Dir names & surname			
Director ID number		Contact number	
Bus physical address			
		Province	
Bus postal address			
		Postal code	
Bus contact numbers		Mobile number	
Bus Email address			
Type of entity	Company <input type="checkbox"/>	Closed Corporation <input type="checkbox"/>	Sole proprietor <input type="checkbox"/> Trust <input type="checkbox"/> Partnership <input type="checkbox"/>
Contact person		Mobile number	
Trading name			
Accounts email			
Industry / Sector			
Bargaining Council			
VAT number		Financial year end	
Number of Employees		Payroll per annum	Turnover per annum
Bank			
Name account holder			
Branch name		Account number	

Agreement – (a) I/We hereby apply for membership of the National Employers’ Labour Association (NELA) and agree to abide by the Constitution and the Rules of the Organisation, as well as any decisions and resolutions that the General Meeting or the Executive Committee may make from time to time. **(b)** I/We agree that although this authority and mandate of the debit order may be cancelled by me/us, such cancellation will not cancel the agreement. I/We shall not be entitled to any refund of amounts which NELA have withdrawn while this authority was in force, if such amounts were legally owed. **(c)** I/We truly affirm the content of this application form to be true and correct. **(d)** I/We understand that my/our personal information will be processed in order to be registered as a member of NELA and to receive ongoing services from NELA. I/We acknowledge and accept that our personal information will be processed, stored and should NELA’s mandate be cancelled, deleted and destroyed in terms of the Protection of Personal Information Act No 4 of 2013 as amended.

NELA’s Constitution and Terms and Conditions are available on request. **MEMBER’S SIGNATURE** _____ **DATE:** _____

Debit Order Instruction - I/We hereby request and authorize National Employers’ Labour Association (NELA) to draw against my/our account with the abovementioned bank(or any Bank or branch to which I/we may transfer my/our account) the total sum of R _____ or any amount as of from time to time determined by the Executive Committee, on the _____ day of each subsequent month commencing on _____. All such withdrawals from my/our Bank account by NELA shall be treated as though they have been authorised by me/us personally.

I/We understand that the withdrawal hereby authorized will be done electronically and also understand that details of each withdrawal will be printed on my bank statement or on an accompanying document. In the event of the payment being rejected by the Bank due to insufficient funds, NELA has the right to present the payment again in the next payment cycle. I/We agree to pay the bank charges to this debit order instruction.

This agreement may be terminated by either party giving the other one (1) calendar month’s written notice. Neither Party may transfer or cede his/her rights or obligations in terms of this agreement unless prior written consent has been obtained from the other party. Any unauthorized transfer or cession of rights or obligations will be null and void.

SIGNATURE OF MEMBER _____ **DATE** _____