



# BEMAWU

**BROADCASTING, ELECTRONIC  
MEDIA & ALLIED WORKERS UNION**

11 Display Gardens, Sarel Baard str, Gateway Industrial Park, CENTURION  
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## BEMAWU APPLICATION FORM

|                     |                                    |
|---------------------|------------------------------------|
| FULL NAMES          | (Full names)                       |
| SURNAME             | (Enter your surname)               |
| ID NUMBER           |                                    |
| PERSONNEL NO.       |                                    |
| WORK E-MAIL         |                                    |
| PRIVATE EMAIL       | (Enter your private email address) |
| WORK TEL NO.        | (Area Code) Number                 |
| MOBILE NUMBER       |                                    |
| JOB TITLE           |                                    |
| SCALE CODE          |                                    |
| Date of Appointment |                                    |

### YOUR EMPLOYER

|   |                                     |
|---|-------------------------------------|
| NAME OF EMPLOYER  |                                     |
| PROVINCE/CITY   | (Province/City/Town where you work) |
| <ol style="list-style-type: none"><li>Membership fee is 0.475% of your basic salary.</li><li>One (1) Calendar Month notice must be given in writing to <a href="mailto:headoffice@bemawu.org.za">headoffice@bemawu.org.za</a> to terminate your membership. You agree to, should there be pending industrial action, not terminate your membership.</li><li>By signing this form you hereby instruct and authorise your employer to deduct the monies referred to in para.1 above and pay it over to the union.</li></ol> |                                     |
| _____   | _____                               |
| DATE  | SIGNATURE                           |