



NATIONAL TRANSPORT MOVEMENT

MEMBERSHIP APPLICATION FORM

PHYSICAL ADDRESS: No 21 Margaret Str, KEMPTON PARK, 1620
CONTACT NUMBER: (011) 394 8032; FAX NUMBERS: (011) 394 9486 or 086 6092610
REGISTRATION NUMBER: LR2/6/2/2025

MEMBER'S DETAILS

PROVINCE: _____ UNION SECTOR: _____
SURNAME: _____ FIRST NAME(S): _____
EMPLOYEE/CLOCK NUMBER: _____ GENDER: _____
DATE OF BIRTH: _____ IDENTITY NUMBER: _____
STATION/DEPOT: _____ COMPANY NAME: _____
RESIDENTIAL ADDRESS _____ COMPANY POSTAL ADDRESS: _____

POSTAL CODE: _____
HOME TEL: _____ COMPANY FAX: _____
CELL NUMBER: _____ POSTAL CODE: _____
COMPANY TEL NO: _____ EMAIL ADDRESS: _____

I, the undersigned commit to abide by the constitution, policies and the decisions of NTM. I further commit to be loyal to NTM and not to bring the union into disrepute in any way.

STOP ORDER AUTHORISATION FORM THE NATIONAL TRANSPORT MOVEMENT, A REGISTERED TRADE UNION (REG NO. LR2/6/2/2025)

I, the undersigned, hereby authorise my employer to deduct from my basic wage or salary, subscription or levies payable by me to the National Transport Movement or its successor in title ("the union") in term of Section 13 of the Labour Relations Act No 66 of 1995, as amended ("LRA"). The amount of the union's subscription that I authorise the employer to deduct from my basic wage or salary is (a) the equivalent of 1% of my basic wage or salary or (b) if the amount in (a) is less than R60,00 per month, then R60,00 per month or (c) if the amount in (a) is more than R105 per month, the R105 per month. I also authorise the employer to deduct from my wages or salary and pay over to the union, any other levies that the National Executive Committee of the union may decide upon.

The employer is required to pay all subscriptions and levies deducted from my wages or salary to the unions head office, whose address appears above, by no later than the 7th day of the month, following the date each deduction was made. The union may change the subscription fee rate from time to time.

I hereby authorise the employer to provide the union with any information that is requested by the National Executive Committee of the union, including any information relating to my employment and membership of the union.

If I cancel this authorisation as a result of my resignation from the union, then I agree that the cancellation of this authorisation will only become valid (a) four weeks after I or my employer having provided the union with written notification of my resignation from the union; and (b) after I have complied with all relevant provisions of the union's constitution.

I hereby terminate any other authorisation of the employer in terms of Section 13 of the LRA to deduct from my wages or salary subscription or levies for any other trade union.

MEMBER SIGNATURE: _____

DATE: _____



NATIONAL TRANSPORT MOVEMENT

REVOCATION/RESIGNATION FORM FROM ANOTHER TRADE UNION

PHYSICAL ADDRESS: No 21 Margaret Str, KEMPTON PARK, 1620

CONTACT NUMBER: (011) 394 8032; FAX NUMBERS: (011) 394 9486 or 086 6092610

REGISTRATION NUMBER: LR2/6/2/2025

RESIGNATION FROM _____ (NAME OF THE TRADE UNION FROM WHICH I RESIGN) AS A MEMBER.

I, (FULL NAMES), _____

ID NUMBER _____

EMPLOYEE/PENSION/CLOCK NUMBER _____

COMPANY _____

DO HEREBY RESIGN AS MEMBER OF AFORESTATED TRADE UNION AND ACCORDINGLY INSTRUCT MY EMPLOYER TO STOP SUBSCRIPTION FEES DEDUCTIONS FROM MY MONTHLY SALARY WITH IMMEDIATE EFFECT HAVING REGARD TO SECTION 13 OF THE LRA.

I HEREBY CONFIRM AND DECLARE THAT I HAVE JOINED NTM AS A MEMBER.

SIGNATURE _____

DATE _____