



THE PUBLIC SERVICES ASSOCIATION OF TRINIDAD AND TOBAGO

APPLICATION FOR MEMBERSHIP

I.D./D.P.
NIS No:
MEM No:

I hereby apply for membership in The Public Services Association Union and promise to conform to the Constitution (Rules) now in force and as may be amended from time to time.

I,
(Block Capitals)

of
(Home Address)

Date of Birth Male Female Status Married
Single
Other

Telephone Contact: Work:..... Home:..... Cell:.....

Email:.....

Employed as

Place of Employment
(Ministry/Department/Div/Company/Other)

apply for membership in the Public Services Association in accordance with the Constitution of the Association

Date of Employment

Are you a member of another Trade Union/Association? If yes please specify

I enclose the sum of Ten Dollars (\$10.00) as Entrance Fee.

Office location where Paysheet is prepared

.....
Signature of Applicant Date Name of Recruiter (In Block Letters)

**Complete and hand in this Form to the Paysheet Clerk of your Department/Div/Company
PUBLIC SERVICES ASSOCIATION OF TRINIDAD AND TOBAGO
AUTHORITY FOR DEDUCTION FROM SALARY**

Name To Paysheet Clerk/Head of Department
(Actual Office of Preparation)

Post Paysheet Address

Place of Work

Sir/Madam,
Please deduct from my salary P.S.A. Subscription in the sum of..... for the month of.....
..... 200..... then monthly thereafter at the rate of \$50.00 each month OR AT ANY OTHER RATE
AS MAY BE DETERMINED BY THE ASSOCIATION FROM TIME TO TIME.

Signature of Applicant Date

THE AMOUNTS DEDUCTED ARE TO BE PAID TO THE PUBLIC SERVICES ASSOCIATION OF TRINIDAD AND TOBAGO, #89 ABERCROMBY STREET, PORT OF SPAIN

Please provide Passport size picture for your PSA I.D. Card