

Join the PSA for a better working life

To join the PSA:

Complete this form. Return it to: PSA, PO Box 3817, Wellington.

Give the slip at the bottom to your payroll so deductions can be made.

Fees: Salary under \$16,500 pa = \$3.60 a fortnight. Salary between \$16,500 and \$33,000 pa = \$7.10 a fortnight.
Salary over \$33,000 = \$14.20 a fortnight.

Note: These membership fees apply from March 1, 2009. Fees are reviewed every two years.

PERSONAL DETAILS

First name:

Last name:

Home address:

Home phone: ()

Mobile phone:

Home email:

Ethnicity: Maori Pacific Islander

Gender: Female Male

Date of birth:

WORK DETAILS

Employer:

Job title:

Work address physical:

Work address (postal)

Work phone: ()

Work email:

Annual gross pay: under \$16,500
 between \$16,500 and \$33,000
 over \$33,000

Hours of work: 30 hours or more pw
 less than 30 hours pw

I agree to abide by the rules of the PSA and authorise the PSA to act as my representative in all matters relating to my employment, including the negotiation and enforcement of my employment agreement. I understand the PSA offers a range of services including expert advice in employment law. In the event there is a legal issue, the PSA will make final determination with respect to progression and PSA representation on the issue.

Signature:

Date:

The information you have been asked for is to enable the PSA to administer your membership.

Products and services are available to you as a member through PSA plus. Unless you request otherwise, your contact details may be made available to product and service providers. If you do not wish to be contacted about PSA plus products and services, please tick the box below.

I do not authorise you to provide my contact details to PSA plus product and service providers (tick).

Complete this section and give to your payroll / employer

To my pay clerk: I instruct my employer to deduct and pay the PSA any membership subscription as determined and duly notified from time to time by the PSA Executive Board.

Name:

Position and location:

Signature:

Date:



For information:
Freephone 0508 FOR PSA (367 772).
Email enquiries@psa.org.nz
Online www.psa.org.nz

join online – www.psa.org.nz