



REFORM IN CONGRESS

Stand No. 2618 Extension 4
Marapong, Enkelbult
Lephalale Municipality
0556

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APPLICATION FOR MEMBERSHIP AND STOP ORDER AUTHORISATION FORM

I hereby apply for RICO membership. I without reservation authorise the company to deduct from my monthly basic salary an amount equivalent to 1% as the subscription fee, or such further amount as the congress may determine and pay to the account designated by the RICO Executive committee.

PERSONAL INFORMATION	Title:			
Surname				
First Name(s)				
ID Number				
Residential Address				
	Code		Province	
Contact	Cell		Work	
	Email			
Marital Status			Number of Children	
Name of Spouse				
EMPLOYMENT INFORMATION	Employer			
Occupation			Engagement Date	
Address of Employment				
	Code		Province	
Fax or Email				

Signature: _____ Witness: _____ Date: _____

EMPLOYER'S ACKNOWLEDGEMENT OF THE STOP ORDER

On behalf of the company, I acknowledge receipt of this stop order and confirm that it is complete. If the union is not contacted by management within seven (7) days, the union will assume that the stop order has been verified and processed

Name: _____ Occupation: _____

Signature: _____ Date: _____

CANCELLATION OF UNION MEMBERSHIP

I (first names & surname): _____ hereby revoke/cancel my membership with
_____ by giving one month notice ending ____/____/____ please resume RICO deductions as from
____/____/____ Signature: _____ witness: _____ Date: _____