



# NATIONAL TRADES UNION CONGRESS

NTUC Members' Hub  
NTUC Centre, 1 Marina Boulevard  
10-00 One Marina Boulevard, Singapore 018989

NTUC Membership Hotline: 6213 8008  
Website: www.ntucmembership.sg

## UNION MEMBERSHIP – APPLICATION FORM FOR INTERBANK GIRO

Form "A"

PART 1: FOR MEMBER'S COMPLETION	
Date	Name of Billing Organisation ("BO") <b>NTUC-UMS</b>
To (Name of Bank)	Member's Name
	Member's Union
Branch	Member's (NRIC/FIN) No.
<b>AUTHORISATION TO BANK</b>	
(a) I / We hereby instruct you to process the BO's instructions to debit my / our account. (b) You are entitled to reject the BO's debit instruction if my / our account does not have sufficient funds and charge me/us a fee for this. You may also at your discretion allow the debit even if this results in an overdraft on the account and impose charges accordingly. (c) This authorisation will remain in force until terminated by your written notice sent to my / our address last known to you or upon receipt of my / our written revocation through the BO.	
My / Our Name(s) (Account Holder)	My / Our Contact (Tel/Fax) No(s).
My / Our NRIC / FIN No. (Account Holder)	My Signature(s) / Thumbprint(s) * (Account Holder)
My / Our Account No.	
*(As in Bank's records) For all banks other than POSB/DBS thumbprints should be affixed in the presence of the bank officer.	

### FOR OFFICIAL USE ONLY

PART 2: FOR BILLING ORGANISATION'S COMPLETION																
Bank			Branch			Billing Account Organization's Account No.						Billing Organisation's Member's Reference No.				
7	1	7	1	0	0	1	0	0	1	0	6	4	8	1	1	0
Bank			Branch			Account No. To Be Debited										

PART 3: FOR BANK'S COMPLETION	
To:	NTUC-UMS NTUC Members' Hub 1 Marina Boulevard #B1-01 One Marina Boulevard Singapore 018989
This Application is hereby	REJECTED for the following reason(s): (please tick)
<input type="checkbox"/>	Signature / Thumbprint# differs from Bank's records
<input type="checkbox"/>	Signature / Thumbprint# incomplete / unclear#
<input type="checkbox"/>	Account operated by signature / thumbprint#
<input type="checkbox"/>	Wrong account number
<input type="checkbox"/>	Amendments not countersigned by customer
<input type="checkbox"/>	Others: _____
_____	_____
Name of Approving Officer	Authorised Signature
	Date