

Payee Reference Number:

EARLY EDUCATION BRANCH

| Name: Workplace Address: Workplace Address: Eircode: Grade or job category: Payroll/personnel/staff number: Annual salary: € | Personal Details | Employment Details | |
|--|---|--|--|
| Also known as: (If different from above) | (Use name as displayed on your payslip) | Employer: | |
| Address: | Name: | Workplace Address: | |
| Address: | Also known as:(If different from above) | | |
| Eircode: Gender: | Address: | | |
| Eircode: Gender: Male Female Annual salary: € | | Eircode: | |
| Annual salary: € | Eircode: | Grade or job category: | |
| Annual salary: € | Conder Mole Female | Payroll/personnel/staff number: | |
| Daytime phone number: Mobile number: (We use this to verify your identity when you contact us) | Gender: Male Female | Annual salary: € | |
| What is your favourite: ? (Write an item of your choice eg colour, holiday destination, etc) Email: | Date or year of birth: | Security question: | |
| Mobile number: (Write an item of your choice eg colour, holiday destination, etc) Email: (Preferably personal and not workplace email) Union Membership History Have you been a member of IMPACT in the past: YES NO STEEL NO ST | Daytime phone number: | (We use this to verify your identity when you contact us) | |
| Email: | Mobile number: | | |
| Union Membership History Have you been a member of IMPACT in the past: YES NO Service details including when and why you left the union I hereby apply for membership of the Irish Municipal, Public and Civil Trade Union. I undertake to abide by the union rules and | modile number. | (Write an item of your choice eg colour, holiday destination, etc) | |
| Have you been a member of IMPACT in the past: YES NO STATE YES, give details including when and why you left the union If YES, give details including when and why you left the union If YES, give details including when and why you left I hereby apply for membership of the Irish Municipal, Public and Civil Trade Union. I undertake to abide by the union rules and | Email:(Preferably personal and not workplace email) | Answer: | |
| YES NO YES NO HTYPES, give details including when and why you left the union If YES, give details including when and why you left I hereby apply for membership of the Irish Municipal, Public and Civil Trade Union. I undertake to abide by the union rules and | Union Membership History | | |
| YES NO YES NO HTYPES, give details including when and why you left the union If YES, give details including when and why you left I hereby apply for membership of the Irish Municipal, Public and Civil Trade Union. I undertake to abide by the union rules and | Have you been a member of IMPACT in the past: | Are you or have you been a member of another trade union: | |
| If YES, give details including when and why you left the union If YES, give details including when and why you left I hereby apply for membership of the Irish Municipal, Public and Civil Trade Union. I undertake to abide by the union rules and | YES NO | | |
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| | | | |
| Signed: Date: | Signed: | Date: | |
| Please check that you have fully completed and signed this form. Then return it to Membership Applications, IMPACT, Nerney's Court, Dublin D01 R2C5. | | | |
| Note for IMPACT members: The completed form should be forwarded to IMPACT head office for insertion of your reference number and onward transmission to your bank. | | | |
| STANDING ORDER | | | |
| To: The Manager: Bank: Bank: | | | |
| Address of bank: | Address of bank: | | |
| Account name(s):(include both names where joint account) | Account name(s): (include both names where joint account) | | |
| BIC: IBAN: IBAN: | BIC: IBAN: | | |
| We authorise and request you to debit my/our | | | |
| Signed: (i) | Signed: (i) | | |
| Signed: (ii) | | | |
| IMPACT ACCOUNT DETAILS | | | |
| To be completed by IMPACT (branch or head office) before transmission to members bank | | e) before transmission to members bank | |
| Bank: AIB plc BIC: AIBKIE2D IBAN: IE74 AIBK 9320 8689 3420 19 Bank Address: 7/12 Dame Street, Dublin 2 | IMPACT Account Name: IMPACT Subscription CC 1 A/C | | |