



Recruited by _____

DESSUSA
802 Olivetti House, 100 Pretorius Street,
c/o Sophie de Bruyn str, Pretoria Central
P.O. Box 2629 Pretoria 0001

Tel: 012 325 4002 Cell: 076 948 1740 Fax: 012 325 7292

Email: dessusa.union@gmail.com Web: <http://dessusaunion.wix.com/dessusa>

DESSUSA APPLICATION FORM

Applicant's Personal Details

Title: _____ Initials: _____ Surname: _____

Full Names: _____

ID number: _____

Residential Address: _____

Postal Address: _____

H: _____ W: _____

C: _____ e-mail: _____

Membership / ID no: _____

Applicant employer detail

Employer: _____

Job Title: _____ Employee number: _____

Work address: _____

Tel: _____ Fax: _____

email: _____

Number of years at current employer: _____

Inclusive of Legal Assist

Once off administration fee: R25.00

Monthly membership fee: R45.00

Debit date: _____

Debit Orders Administrated by **SAGE PAY**

Bank Debit Order Instruction:

Dear Sir / Madam: The details of my / our account are as follows;

Bank: _____

Branch: _____

Branch code: _____

Account name: _____

Account number: _____

Type account: (Savings / Current / Transmission)

This signed Authority and Mandate refers to our contract as dated as on signature hereof (the Agreement). I / We hereby authorise you to issue and deliver payment instructions to the bank for collection against my / our abovementioned account at my / our above mentioned bank (or any other bank or branch to which I / we may transfer my / our account) on condition that the sum of such payment instructions will never exceed my / our obligations as agreed to in the Agreement, and commencing on the commencement date and continuing until this Authority and Mandate is terminated by me / us by giving you notice in writing of no less than 20 ordinary working days, and sent by prepaid registered post or delivered to your address indicated above.

The individual payment instructions so authorised to be issued must be issued and delivered as follows;

- i) On the _____ day (payment day) of each and every month commencing on: _____. In the event that the payment day falls on a Saturday, Sunday or recognised South African public holiday, the payment day will automatically be the very next ordinary business day. Further, if there are insufficient funds in the nominated account to meet the obligation, you are entitled to track my account and re-present the instruction for payment as soon as sufficient funds are available in my account.
- ii) Monthly; on or after the dates when the obligation in terms of the Agreement is due and the amount of each individual payment instruction may not be more or less than the obligation due.

I / We understand that the withdrawals hereby authorised will be processed through a computerised system provided by the South African Banks and I also understand that details of each withdrawal will be printed on my bank statement. Each transaction will contain a number, which must be included in the said payment instruction and if provided to you should enable you to identify the Agreement. a payment reference is added to this form before the issuing of any payment instruction. I / We shall not be entitled to any refund amounts which you have withdrawn while this authority was in force, if such amounts were legally owing to you.

Mandate / We acknowledge that all payment instructions issued by you shall be treated by my / our abovementioned bank as if the instructions had been issued by me / us personally.

Cancellation / We agree that although this Authority and Mandate may be cancelled by me / us, such cancellation will not cancel the Agreement. I / We shall not be entitled to any refund of amounts which you have withdrawn while this authority was in force, if such amounts were legally owing to you.

Assignment / We acknowledge that this Authority and Mandate has been ceded to **Sage Pay (Pty) Ltd** as per your agreement with **Sage Pay (Pty) Ltd**, but in the absence of such assignment of the Agreement, this Authority and Mandate will be null and void.

Signed at _____ on this _____ day of _____ 20 _____.

Signature as used for signing cheque or credit card voucher



THE LABOUR MEKKA MEMBERSHIP

802 Olivetti House, 100 Pretorius Street, c/o Sophie de Bruyn, Pretoria Central,

Tel: 012 325 4002 Fax: 012 325 7292

<http://jmgouws.wix.com/the-labour-mekka>

LEGAL REPRESENTATION

Labour Mekka Membership – R25.00
Free assistance during registration of grievances.
Free representation of members at CCMA hearings (or other relevant bargaining council).
Free representation of members at Labour Court
Free representation / assistance of members during disciplinary proceedings.
Free preparation of appeals (disciplinary hearings).
Free assistance during suspensions.
Free Legal advice.
Free preparation of contracts (wills, service contracts etc)

CONDITIONS

Representation only applicable when allowed by law or Employers Disciplinary Policy.

Representation / assistance include:

- Dismissal-Misconduct; Poor work performance; Medical Incapacity {When allowed i.t.o. LRA}
- Unfair Labour Practices:- Promotions; Suspensions; etc
- Retrenchments
- Organisational Rights

Representation at Labour Court restricted to one case per year.

Benefits commence on date of first payment received and shall cease on date of first payment not received.

The LABOUR MEKKA reserves the right to appoint a designated person, firm or company to represent the member in terms of the contract. {Johan Gouws Attorneys designated i.t.o this agreement}.

Only members are entitled to benefits with exclusion of their children, family and other individuals.

The member indemnifies the LABOUR MEKKA against possible cost order during arbitration or Labour Court hearings. The member will be held responsible in his personal capacity and will be responsible to settle such costs with the other party on demand.

Memberships cancelled due to non-payment will result in the member to re-apply for membership. No refunds of monthly contribution on cancellation.

Signature: _____ Date: _____