

Member Enrolment & Deduction Form

I hereby confirm that I wish to join the TRC Staff Association and agree to the membership fees deduction fortnightly from my pay.

I understand this authorisation will remain in effect until I cancel it in writing.

Employee name:

Employee ID #:

Deduction amount:

\$5.00 (fortnightly)

Effective date:

Today's date

Employee signature:

For any queries around Staff Association membership please email: StaffAssociation@trc.govt.nz

Or send a message via Workplace to TRC Staff Association.

Please return this completed form to a member of the People and Wellness team.

Or email to: hradmin@trc.govt.nz