

**PRISON OFFICERS
ASSOCIATION
Scotland**



*Membership
Application
form*

Instruction to your Bank or Building Society to pay Direct Debits

Please fill in the **WHOLE** form and send it to: POA Scotland, Alba House, 21 Calder Road, EDINBURGH.EH11 3PF Please remember to sign the form in **BOTH** places.



Originators Identification Number **80-00-62**

1: Name and full postal address of your Bank or Building Society Branch

To: The Manager

Bank or Building Society:

Address:

Postcode:

2: Name(s) of account holder(s)

3: Branch Sort Code (from top right hand corner of your cheque)

4: Bank or Building Society Number

5: POAS Reference (For office use only)

Banks and Building Societies may not accept Direct Debit Instructions for certain types of accounts

6: Instruction to your Bank or Building Society Please pay POAS Direct Debits from the account detailed on this Instruction subject to the safeguards assured by the Direct Debit guarantee.

Signed Date

Application for Membership

(Mr/Mrs/Miss/Ms) Surname <input type="text"/>	First name <input type="text"/>
Employed at <input type="text"/>	Prison/Institution <input type="text"/>
Pay Reference Number <input type="text"/>	Have you been or are you a member of this or any other trade union YES <input type="checkbox"/> NO <input type="checkbox"/>
If YES please state which Union <input type="text"/>	

GIFT AID FORM * Please tick the box

I confirm I am a UK taxpayer. Please treat all donations I make or have made to POA Welfare Fund for the past 4 years as Gift Aid donations until further notice. I understand that if I pay less Income Tax and/or Capital Gains tax than the amount of Gift Aid claimed on all my donations in that tax year, it is my responsibility to pay any difference. Please let us know if you want to cancel this declaration, change your home address or no longer pay sufficient tax. * If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.

WELFARE FUND

Every member not objecting shall contribute to the Welfare Fund of the Union, in the manner provided by Annual Conference 2003. Any member not wishing to contribute to the fund should apply to the Union's Head Office for an exemption form.

POLITICAL FUND

I hereby give notice that I am willing, and agree, to contribute to the political fund of the POA and I understand that I shall in consequence be liable to contribute to that fund and shall continue to be so liable, unless I deliver to the Head Office or some other branch office of the union, a written notice of withdrawal. If you choose not to contribute to the political fund of the POA you shall not, by reason of contributing, be excluded from any benefits of the union or be placed in any respect either directly or indirectly under any disability or disadvantage as compared with other members of the union.

DECLARATION * Please tick the box

I understand and agree that any litigation be it Civil or Criminal which may arise from any source whatsoever prior to acceptance of this application for membership, cannot be a matter covered by the Legal Aid facilities of the POA. All information contained within this application is to the best of my knowledge correct. Further, I accept and agree that should I regain/gain membership having made any false statements or declaration it will result in my immediate removal/exclusion from the POA (Rule 4.1). I accept and agree that whilst in membership I will always abide by the Rules, Constitution and associated annexes of the union.

Signed Date

IMPORTANT NOTICE

Please complete and return

DATA PROTECTION

Information you have provided will be held by POA, who are the data controller. POA will use your personal information to process your membership. By signing this form, you have given us your consent to process your personal information.

Sharing your personal information: Your bank details will only be sent to our bank in order to collect your membership subscription. We will only share your contact details with approved POA providers who offer products and services as part of your membership. Please tick the box if you would like to receive information from Union Income Benefit (UIB)

Please tick the box how you prefer to be contacted?

Personal e-mail: Personal e-mail address: _____

Work e-mail: Home address: Work address:

ACCESS TO YOUR INFORMATION AND CORRECTION

We want to make sure that your personal information is accurate and up to date. You may ask us to correct or remove information you think is inaccurate. You can write to us at the address below or email adminscol@poauk.org.uk or phone us on 0131 443 8105. For more information explaining how we use your personal information, please see our privacy statement on our website www.poauk.org.uk. POA Scotland HQ at 21 Calder Road, Edinburgh. EH11 3PF.

I undertake to inform the Union of any change to the above details. * Please tick the box

Surname

First Name

Title

Date of Birth

Date Commenced employment with SPS

POA Membership

Pay Reference Number

Please specify the address to be used for all communications from the Union
(Home address is preferred)

Telephone Number

Address of your place of Work

Pay Band (A B C D etc)

Title (eg Operational Officer)

Any Specialism (e.g. Dog Handler, PTI etc)

Signature

Date



<u>For Office Use Only</u>	
Entered on Computer :	<input type="text"/>
Initials:	<input type="text"/>

**PRISON OFFICERS' ASSOCIATION
DEATH BENEFIT NOMINATION FORM**

Members Surname:.....
Forename(s):
POA Membership No :
Establishment:

I nominate the following person(s) to receive Death Benefit

Name(s):

Relationship to Member:

(Friend, Relative, Partner etc.)

Is the Nominee a replacement?

YES NO

Signature of Member :

Date

N.B.

- 1. If more than one person is nominated, they will share equally unless the contrary is stated
- 2. Death Benefit will be payable only in accordance with Rule 18 of the Rules and Constitution.

**Original to POA Scotland, 21 Calder Road, Edinburgh.
EH11 3PF. Photocopy for your files.**