



Membership Application Form

On completing this form, please return to; **NICSSA Sport & Leisure**, The Pavilion Complex, Stormont Estate, Upper Newtownards Road, Belfast, BT4 3TA. If you have any questions, please do not hesitate to contact us on (028) 9052 0404

For Office Use Only

Date Received:
MRM Updated:
Membership Activated:
SA Number:
Spouse SA Number:

I wish to apply for:

- INDIVIDUAL MEMBERSHIP** - Open to serving staff of the NI Civil Service and NI Public Service Department*
- JOINT MEMBERSHIP** - Open to 2 adults where at least one of the adults is a serving NI Civil Servant or works in a Public Service Department *
- RETIRED INDIVIDUAL MEMBERSHIP** - Open to retired NI Civil Servants and NI Public Service Staff*
- RETIRED JOINT MEMBERSHIP** - Open to 2 adults where at least one of the adults is a retired NI Civil Servant and NI Public Servant*
- ASSOCIATE MEMBERSHIP** - Open to any other person wishing to join NICSSA who does not fall under the above categories. Different pricing structure applies; call (028) 9052 0404 for more information on associate pricing plan.

*Anyone that falls under the public service category and is unsure about your eligibility to join, please call 028 9052 0404

SECTION (A) For all applicants to complete

Title: Mr/Mrs/Miss/Ms/Dr *please delete as appropriate*
 First Name:
 Surname:
 D.O.B: / /
 Mobile Number:
 Home address:

 Postcode:
 Home Telephone No:
 Home Email address:

SECTION (B) To be completed by Civil/Public Service Staff Only

Department:
 Branch:
 Office Address:

 Office Telephone:
 Office Email:

SECTION (C) Partners Details (If applicable)

First Name:
 Surname:
 D.O.B: / /
 Email Address:

SECTION (D) NICSSA Clubs. If you wish to be affiliated to a building based or single sports club please detail here.

Club Name _____ (Please refer to www.nicssa.co.uk for a full list of clubs)

SECTION (E) Marketing Information

Where did you hear about NICSSA Sport & Leisure? (Tick all that apply)

- | | | |
|---|--|-------------------|
| <input type="checkbox"/> A Colleague/Friend | <input type="checkbox"/> Roadshow | On what date...? |
| <input type="checkbox"/> Marketing Literature | <input type="checkbox"/> A sports or leisure event | Which one...? |
| <input type="checkbox"/> Health Works | <input type="checkbox"/> A workplace fitness suite | Which one...? |
| <input type="checkbox"/> The NICSSA Website | <input type="checkbox"/> A workplace presentation | Where was it...? |
| <input type="checkbox"/> Email | <input type="checkbox"/> Other | Please specify... |

What encouraged you to join NICSSA Sport & Leisure? (Tick all that apply)

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> NICSSA Events | <input type="checkbox"/> NICS Social Club | <input type="checkbox"/> Membership Plus Financial Services | <input type="checkbox"/> Membership Plus Insurance |
| <input type="checkbox"/> NICSSA Clubs | <input type="checkbox"/> Membership Plus Offers & Discounts | <input type="checkbox"/> Membership Plus Wine Club | <input type="checkbox"/> Membership Plus Cars |
| <input type="checkbox"/> Activ Healthclub | <input type="checkbox"/> Membership Plus Conveyancing | <input type="checkbox"/> Membership Plus Travel | <input type="checkbox"/> Membership Plus Healthcare |
| <input type="checkbox"/> Season Tickets | | | |

I would like more information on... (Please tick below and a member of staff will be in contact.)

- Membership of The NICS Social Club Membership of ACTIV Healthclub

please turn over to complete...



SECTION (F) Declaration & Payment**(A) To be Completed by NI Civil Servants only**

NICSSA requires your NICS staff reference/payroll number in order to start deductions from your salary. Please ensure that the entire number is recorded accurately as this includes details of both your branch location and payroll number. The reference can normally be found at the top of your salary advice note.

(NICS Staff) Reference Number: (7 Digits)

LETTER	LOCATION			PAYROLL NO.						
□	□	□	□	□	□	□	□	□	□	□

(Industrial Staff) Reference Number: (6 Digits)

□	□	□	□	□	□
---	---	---	---	---	---

(Retired NICS) Superannuation Pension Number: (6 Digits)

□	□	□	□	□	□
---	---	---	---	---	---

(Public Service Staff) Reference Number:

□	□	□	□	□	□	□	□	□	□	□	□
---	---	---	---	---	---	---	---	---	---	---	---

I hereby authorise Central Pay Branch to deduct from my salary/pension the appropriate subscription due

Signature:

Date:

(B) To be Completed when applying for Associate Membership

1. I enclose a cheque made payable to 'NICSSA Sport & Leisure' or
2. I enclose a complete Direct Debit Mandate Form



Please fill in the whole form using a ball point pen and send to:

NICSSA Sport & Leisure The Pavilion Complex Stormont Estate Belfast BT4 3TA

Name(s) of Account Holder(s)

Bank (Building Society account number)

□	□	□	□	□	□	□	□
---	---	---	---	---	---	---	---

Branch Sort Code

□	□	□	□	□	□
---	---	---	---	---	---

Name & Postal Address of your Bank or Building Society

To The Manager	Bank/Building Society
Address	
Postcode	

Instruction to your Bank or Building Society to pay by Direct Debit

Originator's Identification Number

9	6	0	9	0	1
---	---	---	---	---	---

Reference Number (For Office Use Only)

□	□	□	□	□	□	□	□	□	□	□	□	□	□	□	□	□	□	□	□
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

Instructions to your Bank or Building Society
 Please pay NICSSA Sport & Leisure Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with NICSSA Sport & Leisure and, if so, details will be passed electronically to my Bank or Building Society.

Signature(s)
Date

Banks and Building Societies may not accept Direct Debit Instructions for some types of account

The Direct Debit Guarantee

This Guarantee should be detached and retained by the Payer

- This guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the scheme is monitored and protected by your own Bank or Building Society.
- If the amounts to be paid or the payment dates change NICSSA Sport & Leisure will notify you ten working days in advance of your account being debited or as otherwise agreed.
- If an error is made by NICSSA Sport & Leisure or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.
- You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please also send a copy of your letter to us.

