

MEMBERSHIP APPLICATION FORM



Phone No. 01-4212990
Freephone: 1800 778787
Email: info@psfs.ie
Web Site: www.psfs.ie



Please complete this form and
return to:

The Secretary,
Public Service Friendly Society,
1st Floor West, The Plaza Centre,
Belgard Road, Tallaght, Dublin 24.
D24 XKN7

I wish to become a member of the Public Service Friendly Society in accordance with
the registered rules. *

BLOCK CAPITALS PLEASE AS SHOWN IN OFFICIAL RECORDS

Surname: _____
First Name(s) _____
Home Address: _____
Department: _____
Office Address: _____
Grade: _____
Group/Personnel No. _____
Email Address: _____
Telephone Numbers: Office: _____ Home: _____ Mobile: _____

* *Any person who is permanently employed in the Service or who retires from the Service shall be qualified for admission to membership of the Society.*

AUTHORISATION FORM

**The Accountant,
Salaries Section,
Department of** _____

Please deduct from my salary, until further notice, a sum equivalent to twenty-five cent per hundred Euro (equal to 0.25%) of my inclusive yearly salary, such deduction to be made in equal instalments throughout the year, and pay it to the account of the Public Service Friendly Society.

Name: (Official) _____

Group/Personnel No. _____

Grade: _____

Signature: _____ Date: _____