

BARGAINING COUNCIL FOR THE MEAT TRADE GAUTENG
(LR2/6/6/136)

Private Bag X3060, Randburg, 2125
Tel : (011) 646 0290
Email: bcmr@wadavidson.co.za

72A Oxford Road, Riviera, 2193
Fax : (011) 646 3566
Website : www.bcmr.co.za

EMPLOYEE REGISTRATION FORM

Registration of the business as detailed herein is hereby made in terms of the compulsory binding provision of the Main Collective Agreement for the Meat Trade Gauteng, Clause 21 of Government Notice R856 of Government Gazette No. 23535 dated 28 June 2002.

In terms of the Protection of Personal Information Act 4 of 2013, the Bargaining Council and Retirement Funds are committed to protecting individual privacy & recognizes their responsibility to comply with statutory requirements in collecting, processing and distributing personal information. Upon signature, the employee consents to the processing of personal information. In terms of Section 18 of said Act, the Council and Retirement Funds hereby inform the employee that the information collected may be shared with a registered risk insurer and an administrator approved by the Financial Sector Conduct Authority.

REGISTRATION NO

EMPLOYEE DETAILS			
SURNAME			
FIRST NAMES			
I D NO			
DATE OF BIRTH			
POSTAL ADDRESS			
CELL NO		CODE	
GENDER		EMAIL	
		MARITAL STATUS	
DEPENDANTS			
FIRST NAME	DATE OF BIRTH	RELATIONSHIP	
EMPLOYEE'S SIGNATURE			

EMPLOYMENT DETAILS			
NAME OF BUSINESS			
TEL NO	JOB CATEGORY		
DATE EMPLOYED	RATE OF PAY		
EMPLOYER'S SIGNATURE			

REGISTERED FOR:	Pension	Provident	Sick Benefit Fund			Funeral	Union
			Med Aid Only	Med Aid + Hospital Plan	+ Dependants		

INSPECTOR'S NAME		RECEIVED DATE	
PROCESS DATE		PROCESSED BY	

**BARGAINING COUNCIL FOR THE MEAT TRADE GAUTENG
(LR2/6/6/136)**

Private Bag X3060, Randburg, 2125
Tel : (011) 646 0290
Email: bcmt@wadavidson.co.za

72A Oxford Road, Riviera, 2193
Fax : (011) 646 3566
Website : www.bcmt.co.za

**MEAT TRADE PROVIDENT FUND/ MEAT TRADE PENSION FUND
DEATH BENEFICIARY NOMINATION**

-	This form is to be completed by the Member and retained by the Bargaining Council for Meat Trade Gauteng.
-	A new form is required to be completed as soon as a change in the Member's circumstances takes place, for example on marriage, or on the death of a Dependant or Nominated Beneficiary, etc.
-	If the spaces provided on this form are insufficient, then additional information, which is to be signed by the member, may be attached to this form.

Member Name	
Fund Membership number	

DEPENDANTS / NOMINATED BENEFICIARIES

I understand that on my death, my spouse, children and any other person financially dependent on me, may be considered by the Trustees managing the affairs of the Fund as recipients of benefits payable by the Fund. These persons are classed as my DEPENDANTS and I list them below:-

Full Name	Date of Birth	Relationship	% degree of dependency	Address & Telephone number

Should your dependants still be minors the benefit could be paid to a family member, or a nominated guardian, or transferred into a Beneficiary Fund paid on a monthly basis to the family member or nominated guardian for the upkeep of your minor dependants, should you pass away. On electing the person you must ensure you can trust them concerning the wellbeing of your children.

Full Name	Date of Birth	Relationship	Address & Telephone number

I wish to provide below, details of other factors which may influence the Trustee's considerations, for example, how the benefits should be paid, such as in lump sum form or transferred into a Beneficiary Fund.

--

Signature of Member	Date
Signature of Witness	Date
(the witness should not be a DEPENDANT or NOMINATED BENEFICIARY)	