



GENERAL, DOMESTIC & PROFESSIONAL EMPLOYERS ORGANISATION

LR2/6/3/311

Postal address:
P O Box 233
WILDERNESS
6560

Office address:
Unit 36, South Street
The Waves
WILDERNESS
6529
Tel: 044 877 0405
Fax: 086 560 3741

2017/2018

APPLICATION FOR MEMBERSHIP TO BE COMPLETED IN FULL:

Or UPDATE OF DETAILS

(NB. Application does not automatically guarantee membership)

Fax/email application form with proof of payment to: 086 560 3741 or email norman@gdpo.co.za

SECTION A

* **Please note membership must be applied for, for the particular geographical workplace of a Company/Employer e.g. Division, Branch, Factory, Store, Retail outlet etc. A National or International Head office will not cover the above.**

1. Full name of Workplace or Sole Proprietor _____

Geographical location _____

2 Trading name of Enterprise _____

3*** **UIF NUMBER (COMPULSORY)** _____

4. Company or Closed Corporation registration number: _____

5. Postal address _____ Physical address _____

Code: _____ Code: _____

5. Province: _____ Province: _____

6. Telephone No: _____ Fax No: _____

7. Email address of responsible person: (Please print) _____

8. Mobile number: _____

9. I/We have been introduced/recruited by: _____ of _____

(Print)

(Print)

DECLARATION

(a) I/We hereby make application for membership of the General, Domestic and Professional Employers' Organisation, and wish to associate with other member employers and agree to abide by the Constitution and rules of the Organisation and any decisions and resolutions which a General Meeting or the Executive Committee may pass from time to time, as a condition of membership.

(b) I/We hereby indemnify the Organisation from any claim or liability whatsoever from any negligent/irresponsible behaviour or action of any Member, which may arise out of my/our request for representation and/or advice.

10. ANNUAL ADMINISTRATIVE FEE

I/We enclose proof of payment in the amount of _____ (See Section B), being the current annual Administrative Fee.

11. I/We truly affirm that the contents of this Application Form are true and correct.

SIGNED AT _____ THIS ___ DAY OF _____ 201__.

SIGNATURE (Authorised person) _____ DESIGNATION / TITLE _____

FULL NAME: PRINTED _____

INTRODUCING MEMBER'S SIGNATURE _____

THE COMPLETED APPLICATION FORM AND ALL ACCOMPANYING BACKUP DOCUMENTATION AND PROOF OF PAYMENT MUST BE SENT BACK TO THIS OFFICE. (THE ORGANISING OFFICIAL/ RECRUITING MEMBER IS RESPONSIBLE FOR CHECKING THE DETAIL AND ASSISTING THE APPLICANT WHERE NECESSARY).

SECTION B

Membership Fees: (These Fees may be amended from time to time in Terms of the Constitution)

- **ANNUAL ADMINISTRATIVE FEE (if renewed annually without a break):**
- **R810.00** for member with 1-9 employees
- **R1285.00** for member with 10-199 employees
- **R2140.00** for member with 200-2000 employees
- **R3710.00** for member with 2001+ employees
- **Proof of number of employees (EMP201) or SARS return must be attached.**

BANKING DETAILS: GDPEO

NEDBANK BRANCH: GEORGE BRANCH CODE: 191605 ACCOUNT NO: 1916 054 935.

(Once Application is approved and proof of payment is received, Certificate will be issued within 48 hours)

SECTION C

BUSINESS INFORMATION REQUIRED

(i) **SECTOR/INDUSTRY SECTOR IN WHICH EMPLOYER IS ENGAGED IN:** _____

Short description of nature of business: _____

Do you fall under the jurisdiction of a Bargaining Council? If so which one? _____

(ii) **No of employees employed at the physical address of the employer/workplace:** _____

(ii) (a) **Are you a paid up member of another registered employers' Organisation? YES / NO**

(b) **If yes, name of Association/Organisation:** _____

Executive Committee:

Chairperson: N. E. Seaber; Vice chairperson: T. Kassel
G. Bessenger; W. Verster; A. Koen