



TEACHERS SAVINGS AND LOANS SOCIETY LIMITED

Please attach Passport size photo here.

MEMBERSHIP FORM

PERSONAL DETAILS:

Full Name: (given names) (surname)
Date of Birth: Marital Status:
Village: () Male: () Female: (Tick in the appropriate column)
District: Province:

EMPLOYER DETAILS:

Payroll Number: Net Salary:
Employer Name:
Postal Address:
Ph No: Fx No: Email Address:
Occupation: Office Location:
Date joined current employer: Years of Service:

NOMINEES DETAILS:

I hereby nominate the persons below to receive the amount standing to my credit in the event of my death:

Table with 7 columns: Name of Nominee, Date of Birth, Relationship to Member, Name of Guardian*, Age of Guardian*, Guardians Relationship to Nominee, Amount to be paid to each Nominee (%). Contains 5 empty rows.

*Note: If these is insufficient space above to write all your nominees, please write these on another sheet (same copy), which you should sign and attach to this form. Refer overleaf for more details.

Signature of Member:

Dated This day of 200

EMPLOYER'S DECLARATION:

I hereby declare that:

- (i) the member completed the details and made the nominations in my presence after he/she had or this form read and explained to him/her by me and he/she understood the contents of this form and;
(ii) the details and nomination are true and correct in every particular; and
(iii) at the time of signing of this form no alterations were made or noted on this form.

Name of Authorized Officer : Signature :
Designation/Position : Ph No (B/hrs) (A/hrs):
Email Address :

Dated this day of 200



THIS APPLICATION WAS WITNESSED BY AN EMPLOYEE OF THE TEACHERS SAVINGS AND LOANS SOCIETY LIMITED:

WITNESSED NAME :

WITNESSED SIGNATURE : POSITION:



TEACHERS SAVINGS AND LOANS SOCIETY LIMITED

GUIDELINES FOR NOMINATION

1. This Form represents a personal direction from you to **Teachers Savings & Loan Society Ltd** to pay your contributions to persons that you want to receive your contribution in the event of your death.
2. The law says that you can nominate any member of your family including your wife or husband, children, parents, brothers, sisters or any other person as your wish
3. **Teachers Savings & Loan Society Ltd** will only pay your contributions to those persons you have named in this Form and no other. It is therefore important that you name those persons correctly and also indicate clearly what portion of the contribution you want each of them to receive.
4. If at anytime you marry or separate from your wife or husband or you have children or a person you had previously nominated has died, you should immediately update your nomination and continue to review your nomination on a regular basis. You can do this by filling in a form called **Notice of Change of Nomination Form**. This is so that in the event of your death your money is properly paid out to the persons that you intended it to be paid out to and avoid family disputes as to who should receive your contribution.
5. If you decide to nominate a child that is less than 18 years old then you must nominate an older person such as your wife or husband, parent, brother or sister as the child's guardian. It should be a person that you trust will look after the interest and welfare of your children.
6. Where you have not made any nomination or the persons you had nominated are no longer alive, then your contributions will be paid out to persons who are entitled to receive it in accordance with a decision of the Court.
7. If your nomination relates only to part of your contributions (eg. 50%) then that part will be paid to the person you had nominated while the other part which you did not indicate will be paid out to persons who are entitled to receive it in accordance with a decision of the court.
8. The persons who receive your contributions under those circumstances may not necessarily be the persons you would have liked to benefit from your death. But that is what will happen if you do not make the nomination or make changes to the existing nomination to reflect your wishes.
9. In the event of your death, **Teachers Savings & Loan Society Ltd** reserves the right to offset outstanding monies owed, this is stated under the Savings & Loan (Amended) Act 1975, Section 22.
10. If the time of your death you owed money to other persons or organization, the law prohibits the use of your contributions to settle those liabilities or make your contributions subject to set-off, counter-claim, fee, costs, charges or any other deductions. The only exception is a nominal tax of 2% which is required by the law to be imposed at the time your nominees withdraw the contribution.
11. If you have further queries or require assistance regarding this Form, you can contact the Member Service Section at

Teachers Savings & Loan Society Ltd
P.O. Box 319
WAIGANI
National Capital District
Phone : (675) 300 2200
Fax : (675) 325 7679
Email : marketing@tsl.org.pg

For Society Use Only

Application: Approved / Rejected/ Deferred / (Circle upon action)

Name: _____

Occupation: _____ Signature: _____

Date Salary Deduction Authority sent: / /

Actioned by: _____

Approval given by: _____

New Member No: _____

Date of EDP Update: / / By: _____



TEACHERS SAVINGS AND LOAN SOCIETY LIMITED

“Not for Profit, Not for Charity, But for Service”

Head Office:

P.O. Box 319, Waigani, NCD Phone: 300 2200, Fax: 325 7679

IRREVOCABLE AUTHORITY TO DEDUCT

The Officer in Charge/Salary Calculator
Salary Section

.....
.....
.....

Dear Sir/Madam,

I, Occupation

Employee File No: Membership No: request that you deduct the sum of

(K)Kina each fortnight from my salary
and that you pay this money to TEACHERS SAVINGS AND LOAN SOCIETY LIMITED.

This authority will also authorise you to deduct from any monies payable by my employer upon my retirement or termination of employment, such sum as the Teachers Savings and Loan Society Limited shall advise is owing to clear my indebtedness to the Society and to accept their receipt thereof.

This authority is to remain in force until cancelled in writing by the society.

Signature: Date:...../...../.....

Location:

The break-up's of the total to be deducted are shown as follows:-

<u>CURRENT DEDUCTION</u>		<u>NEW DEDUCTION</u>	
Loan Repayment	K.....	Loan Repayment	K.....
Savings	K.....	Savings	K.....
Christmas Club	K.....	Christmas Club	K.....
School Fee Club	K.....	School Fee Club	K.....
Tisa Insurance	K.....	Tisa Insurance	K.....
Total	K _____	Total	K _____

For Society Office Use

Date Received:/...../.....

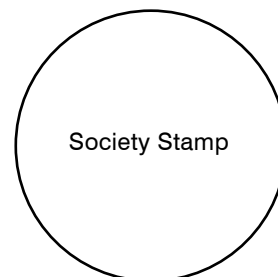
Date Despatched to Salaries Section:/...../.....

Receiving Officer's Signature:/...../.....

New Authority Approved/ Rejected Deferred

Manager's Signature:

Date:...../...../.....



THIS AUTHORITY SUPERSEDES ANY AUTHORITY NOW CURRENT