



Federation of Island Rescue Employees

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www.rescueemployeesfederation.org



Trade Union Subscription & Salary Deduction Form

MEMBER DETAILS

Full Name: _____

Employee/Service Number: _____

Job Title/Rank: _____

Station/Department: _____

Employer: _____

Contact Number: _____

Email Address: _____

UNION SUBSCRIPTION AUTHORISATION

I, the undersigned, hereby apply for membership in the Federation of Island Rescue Employees (FIRE) and agree to abide by its rules and constitution. I authorize the Jamaica Fire Brigade to deduct a monthly subscription equal to 1% (one percent) of my basic salary, and to remit this amount directly to FIRE.

This authorization shall remain in effect until revoked by me in writing, in accordance with union rules.

Member's Signature: _____

Date: _____

FOR OFFICE USE ONLY

Date Application Received: _____

Authorized by (Union Officer): _____

Signature: _____ Date: _____

