



**APPLICATION FOR CSPA MEMBERSHIP AND AUTHORITY TO DEDUCT CSPA
SUBSCRIPTIONS FROM PENSION**

Please complete in BLOCK LETTERS and return to:

Freeport RTRX-RKUY-SELT (No stamp required)
Civil Service Pensioners' Alliance,
GROSVENOR HOUSE
125 HIGH STREET
CROYDON, CR0 9XP

Applicant's Details

| | | | | |
|---|-------------------------|-----------------------------|----------|--------------------|
| Title: | Forename: | Other Initials: | Surname: | Nat Ins No: |
| Date of Birth: / / | Date of Retirement: / / | Pensioner Reference Number: | | |
| Address: _____ | | | | |
| | | | | Post Code: _____ |
| Email: _____ | | Telephone: _____ | | |
| Spouse's/Partner's Details (If applying for joint membership. Otherwise leave blank) | | | | |
| Title: | Forename: | Other Initials: | Surname: | Date of Birth: / / |

If you are applying as the widow or widower of a Civil Servant please tick here

*I/We wish to join the Civil Service Pensioners' Alliance and I authorise until further notice deduction of subscriptions from my pension for payment to the Civil Service Pensioners' Alliance the sum of

£2.00 per month

£2.80 per month

*£2.00 per month (for individual membership) or *£2.80 per month (for joint membership) *Please tick box as appropriate

*I/we agree that the deduction rate may be varied if subscription rates alter

*I/we agree to the use of my/our personal contact details to enable CSPA to make marketing calls, send texts or emails about membership benefits and services to be notified to me/us (Please tick box to indicate agreement)

| | |
|------------|-------|
| Signature: | Date: |
|------------|-------|