

**Memorial University of Newfoundland Pensioners' Association (MUNPA)**

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**MUNPA Information Form**

To fulfill privacy requirements for MUNPA to receive your information, please complete and return this form to the Department of Human Resources, Payroll, Room A-4023, Arts and Administration Building, Memorial University, St. John's, NL, A1C 5S7.

**Membership**

All retirees from Memorial University, and their surviving principal beneficiaries, are automatically members of the MUN Pensioners' Association. MUNPA's role is to advocate on behalf of our members, provide social networking opportunities, social events, and keep our membership informed through email, our newsletter (***Your Voice***), and our website, ([www.mun.ca/munpa](http://www.mun.ca/munpa)). Funding for these services comes from membership fees of our supporting members. MUNPA's bylaws (Article 8.1) provide for a voluntary, modest, annual membership fee, to be set by members at a general meeting.

**Please choose ONE of the options below**

- I hereby authorize the Department of Human Resources to deduct from my pension monthly the amount approved by the MUNPA membership and remit this amount to MUNPA. *Note: As of June 2012 the fee is \$2.00 per month.*
- Instead of deduction from my pension, I prefer to pay the annual fee by cheque (see address below or on the MUNPA website) or by EMT (contact [MUNPA@mun.ca](mailto:MUNPA@mun.ca) to arrange this). *Note: As of June 2012 the fee is \$24.00 per year.*
- I do not wish to contribute to MUNPA.

Banner ID # (printed on pension pay stub): \_\_\_\_\_ **AND/OR** Employee #: \_\_\_\_\_

Preferred Title:  Ms.  Mrs.  Mr.  Prof.  Dr.  Other: \_\_\_\_\_

First Name: \_\_\_\_\_ Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

I am a  MUN Retiree **OR** I am  Principal Beneficiary of: \_\_\_\_\_ who

Retired from:  St. John's Campus  Grenfell Campus  Marine Institute

Faculty/School/Department: \_\_\_\_\_ Staff  Faculty

Mailing Address: \_\_\_\_\_

Town/ City: \_\_\_\_\_ Province/State: \_\_\_\_\_ Country: \_\_\_\_\_

Postal/Zip Code: \_\_\_\_\_ E-mail Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**MUN Retirees:** I would like my MUN e-mail address to be listed in the MUNPA section of Memorial's online directory (only @mun.ca, @mi.mun.ca and @grenfell.mun.ca e-mail addresses can be included):  Yes  No

I consent to MUN's Department of Human Resources disclosing the above contact information to MUNPA: 1) for the purpose of administering membership fees, if I opt to have membership fees deducted by Human Resources as set out above; and/or 2) for the purpose of maintaining the membership list and communicating with members. (*Note: The information you provide will be held securely and used only for the purposes described above and disclosed only as permitted by law.*)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date