

MARITIME UNION OF AUSTRALIA **APPLICATION TO HANG-UP-BOOK**

(Suspension of Membership)
Maritime Union of Australia

73 Southgate Ave, Cannon Hill QLD 4170 Phone: **07 3395 7215** Fax: 07 3395 7688

email: muaqld@mua.org.au

Branch:		Member No.:	
Title (Mr, Mrs, Ms, Miss):	Surname	e:	
Given Names:		Preferred Name:	
Postal Address:			
		Postcode:	
Residential Address:			
		Postcode:	
		/ork):	
		x:	
Email:			
Reason for applying to Suspe	end Membership	(please indicate):	
☐ Leaving industry for per	_		
, ,		od not exceeding 12 months	
☐ Taking leave for period :	-	_	
☐ Other:	_		
		_ / / to / / _	
Date Paid to:/		.,,,,,,,	
		ny Membership is dependent upon payr	nent of
		files, as required under Rule 12(a)(ii).	
_		lembership, I am exempt from paym	nent of
_		rt in any meeting in the Union or be ent	
nominate for any Office in	the Union or vo	ote in any election in the Union, as pe	er Rule
12(b)(ii).			
I am aware that after a ye	ar has expired a	and I have not returned to be engage	d in or
seeking to be engaged in a	n occupation cov	rered by the Eligibility Rule (Rule 3), the	hen my
Membership may be cancelle	•		
	Signed by I	Member:	
		Date:	
OFFICE USE			
Date Received:			
Join Date:		Expiry Date:	
		•	
-			
•		_ Other:	
Comments:			
ACCEPTED / NOT ACCEPTED Br	anch Secretary	Dated:	
ACCLUID / NOT ACCLUID DI		Dated:	
	Littered by	Duccu.	

Form 5 Version 1.03

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