

## UWPI MEMBERSHIP BENEFIT SCHEME

NAME : \_\_\_\_\_ BRANCH : \_\_\_\_\_  
NRIC NO : \_\_\_\_\_ DATE OF APPLICATION : \_\_\_\_\_  
DATE JOIN UNION : \_\_\_\_\_ TEL (O/HP) : \_\_\_\_\_

### CATEGORIES :-

#### PLEASE TICK ONE OF THE BOXES

- |  |   |
|--|---|
| <p>(A) MARRIAGE BENEFIT (\$50.00) <input type="checkbox"/></p> <p>(B) CHILD BIRTH BENEFIT (\$50.00) <input type="checkbox"/></p> <p>(C) DEPENDANT'S DEATH BENEFIT (\$50.00) <input type="checkbox"/></p> | <p>(D) EDUCATION GRANT BENEFIT</p> <p>PSLE (220 PTS) - \$60.00 <input type="checkbox"/></p> <p>'O' LEVEL - \$120.00 <input type="checkbox"/><br/>(5 SUB = 18 PTS)-<br/>(INCL,ENG/MATHS)</p> <p>'A' LEVEL - \$180.00 <input type="checkbox"/><br/>2'A' / 2'O' / GP</p> |
|--|---|

#### PREPARED BY :

BRANCH SECRETARY : \_\_\_\_\_  
SIGNATURE  
\_\_\_\_\_  
NAME

APPROVED BY : PRESIDENT : \_\_\_\_\_  
GENERAL SECRETARY : \_\_\_\_\_  
GENERAL TREASURER : \_\_\_\_\_

**PLEASE ATTACH SUPPORTING DOCUMENTS FOR CLAIM**