



Trinidad & Tobago Police Retirees Association

First Floor, Riverside Plaza Annexe, Besson Street, Port of Spain

Telephone: 624-9876; 222-5277 // WhatsApp: 462-8480 //

Website: www.policeretireestt.com / Email: tpsretirees1@gmail.com

APPLICATION FOR MEMBERSHIP

LAST NAME:	FIRST NAME:	MIDDLE NAME:	REGIMENTAL No.	PLACE RECENT PHOTOGRAPH HERE
ADDRESS		EMAIL ADDRESS:		
PHONE No. (HOME)		CELL No.		
DATE OF BIRTH: (D/M/Y)		DATE OF RETIREMENT: (D/M/Y)		
NIS No.		I.D. No.		
SERVICE START DATE :	(D/M/Y)	SERVICE END DATE:	(D/M/Y)	RETIRED RANK:

BENEFICIARY INFORMATION

LAST NAME:	FIRST NAME:	MIDDLE NAME:	MAIDEN NAME (IF ANY)
ADDRESS:		EMAIL ADDRESS:	
PHONE No. (HOME)		CELL No. :	
NATIONAL IDENTIFICATION: (ID/DP)		RELATIONSHIP TO APPLICANT:	

BENEFICIARY INFORMATION

LAST NAME:	FIRST NAME:	MIDDLE NAME:	MAIDEN NAME (IF ANY)
ADDRESS:		EMAIL ADDRESS:	
PHONE No. (HOME)		CELL No. :	
NATIONAL IDENTIFICATION: (ID/DP)		RELATIONSHIP TO APPLICANT:	

I agree that should my beneficiary pre-decease me, and should I not nominate another beneficiary, my death benefit payable by the Association would be paid to the Funeral Home charged with my funeral arrangements.

REGISTRATION AND SUBSCRIPTION FEE

I _____ having applied for membership of the above named Association, and having paid the application fee of Twenty-five (\$25) dollars, agree to pay a monthly subscription of One Hundred and Twenty-Five (\$125) dollars, once my application is approved.

Signature: _____ Date: (D/M/Y) _____

METHOD OF PAYMENT: PENSION DEDUCTION CASH

I _____ NIS No. _____ agree to have my pension subscription from the TTPS - Pensions and Gratuities to the Trinidad and Tobago Police Retirees' Association increased to include the payment of \$_____ for _____ mentioned above.

Signature: _____ Date: (D/M/Y) _____

FOR OFFICIAL USE ONLY

RECOMMENDED BY:	APPROVED <input type="checkbox"/> NOT APPROVED <input type="checkbox"/>
LEDGER NO:	DATE: (DD/MM/YYYY)
GENERAL SECRETARY:	PRESIDENT: