



## NATIONAL ASSOCIATION OF RETIRED FIREFIGHTERS SOUTH YORKSHIRE

Member of the Public Service Pensioners Council  
Member of Age Concern Forum

### MEMBERSHIP APPLICATION FORM

**Important: Do not return this form with your retirement bundle.** Please complete Part 1 and Part 2 in **BLOCK CAPITALS** and then return the whole form by post to:

Mr D. Lockwood  
South Yorkshire Treasurer  
National Association of Retired Firefighters  
84 Meadowgate Avenue  
Southall  
Sheffield  
S20 2PS

#### **Part 1:**

**Full Name:** \_\_\_\_\_ **SYFR Payroll No.** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ **Email:** \_\_\_\_\_

**Post Code:** \_\_\_\_\_ **Telephone No:** \_\_\_\_\_

**Last Station:** \_\_\_\_\_ **Date Retired:** \_\_\_\_\_

Please indicate which branch you wish to be affiliated to:

**Barnsley**       **Doncaster**       **Rotherham**       **Sheffield**

**Part 2:** (To be forwarded by the Treasurer to SYFR Payroll)

### NATIONAL ASSOCIATION OF RETIRED FIREFIGHTERS - SOUTH YORKSHIRE

I hereby authorise South Yorkshire Fire and Rescue to deduct from my pension payments a monthly subscription to the National Association of Retired Firefighters, at the rate in force at the time.

Furthermore, I request that any changes to my address are notified, to the South Yorkshire Treasurer of NARF.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Payroll No:** \_\_\_\_\_

**For Office Use:**

**Initials:**

**Date:**

1. Branch Secretary Notified:

2. Part 2 of Application forward to SYFR Payroll
