



DIRECT DEBIT MANDATE



Originator's Identification Number 9 6 0 5 1 1	FOR OFFICE USE ONLY	
Our Reference (INTO Membership Number)		
* Please complete these boxes		
Name and full postal address of your Bank or Building Society		
To the Manager		
* Name of Bank / Building Society:		
* Branch:		
* Full Postal Address:		
Postcodes		
* Name of Account to be debited:		
* Account Number:		
Instruction to Your Bank or Building Society Please pay the Irish National Teachers' Organisation Direct Debits from the account detailed on this instruction subject to the safeguards assured by the Direct Debit Guarantee scheme. I understand that this instruction may remain with the Irish National Teachers' Organisation and, if so, details will be passed electronically to my Bank or Building Society.		
* Signature:		
* Date:		
Banks and Building Societies may not accept Direct Debit instructions for some types	of account	
The Direct Debit Guarantee • This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits • If there are any changes Debit the Irish National Teachers' Organisation will notify you (normally 10 working days) in advance of your account being debited or as otherwise agreed. If you to collect a payment, confirmation of the amount and date will be given to you at the time of the request • If an error is made in the payment of your Direct Debit	request the Irish National Teachers' Organisation	

This copy of the guarantee should be detached and retained by the payer

building society. Written confirmation may be required. Please also notify the Irish National Teachers' Organisation.

The Direct Debit Guarantee • This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits • If there are any changes to the amount, date or frequency of your Direct Debit the Irish National Teachers' Organisation will notify you (normally 10 working days) in advance of your account being debited or as otherwise agreed. If you request the Irish National Teachers' Organisation to collect a payment, confirmation of the amount and date will be given to you at the time of the request • If an error is made in the payment of your Direct Debit, by the Irish National Teachers' Organisation or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society • If you receive a refund you are not entitled to, you must pay it back when the Irish National Teachers' Organisation asks you to • You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify the Irish National Teachers' Organisation.

Teachers' Organisation or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society • If you receive a refund you are not entitled to, you must pay it back when the Irish National Teachers' Organisation asks you to • You can cancel a Direct Debit at any time by simply contacting your bank or



MEMBERSHIP APPLICATION FORM (DD)

Office Use Only:	Membership Number	Branch	
	Deductions Commence	Acknowledged	
Teacher Reference Number:			
(Please circle): Mr / Miss /	Mrs / Ms		
First Name:	Surname:	Date of Birth:	
Home Phone No:	Mobile No:		
Email:			
Home Address:			
		Postcode:	
College of Education Attende	d:		
Teaching Qualification/s Obta	ained:		
Year Qualified:	School Name:		
School Address:			
		Postcode:	
School Reference Number:	Yea	r of First Appointment by DE:	
Have you previously been a n	nember of INTO? (Please circle) Yes	No	
Please circle: Assistant Te	acher Vice-Principal	Principal	
Please circle: Permanent	Temporary (year or more)	Substitute NQT	
Please circle: Full-Time	Part-Time		
I confirm that the above details are correct and I wish to join the Irish National Teachers' Organisation subject to the Rules of the Organisation. I hereby undertake, if accepted as a member, to abide loyally by the Rules of the Organisation and to use my best endeavours to promote its objectives and interests.			
Signed:	Dat	e:	

DIRECT DEBIT MANDATE

Signed:

Thank you for completing and signing the INTO application form / direct debit mandate. By doing so members authorise INTO to contact their bank / building society to set up a monthly direct debit at the appropriate rate. Members understand and agree that:

- Members paying by direct debit will provide bank details which INTO will forward to their bank with a request to set up monthly direct debits;
- Any member paying by direct debit who resigns from INTO will provide written notice of same and accepts personal responsibility to contact their bank regarding their decision to cease direct debit contributions;
- The direct debit payment facility is being made available solely as a matter of convenience to members;
- Beyond collecting the sums deducted for INTO no further responsibility of any kind is accepted in this matter;
- The deduction is to commence as soon as possible and to continue until and unless I serve further written notice to INTO;
- The INTO may alter the amount of this deduction and will inform members in writing before any change is implemented;
- Any arrangements for the refund of deductions or collection of arrears are to be made directly with INTO;
- I will correspond with INTO in relation to the deduction from my bank / building society account or the product that I am availing of;

wish to amend o There may be a d	onsibility to ensure the correct deduction is made from my bank / building society and to notify INTO if I cancel the deduction; elay in commencing or ceasing my direct debits due to scheduling of direct debits and the fact that nandates are submitted to INTO's bank by a certain date.
Signed:	Date:
data in accordance ("Data Protection INTO website at wo Consent Personal data reveal Protection Law. In o	INTO Data Privacy Policy ("Privacy Policy"). This Privacy Policy explains how the INTO processes personal with the Data Protections Acts 1988-2018 and the General Data Protection Regulation Law"). This Privacy Policy may be amended and updated from time to time and can be accessed on the rw.into.ie. ling an individual as a member of a trade union is a "special category" of personal data under Data order for us to complete your INTO membership application and to act as your trade union representative our Privacy Policy, we require you to provide your explicit consent, to the following processing, by ticking
1. Disclose n	nay (please tick the boxes if you consent): by name, address and bank details to my Bank to arrange monthly payment of my membership on by direct debit.
	o my employer that I am a member of INTO. the INTO processing the special category of personal data as indicated above. I fully understand that I am

You may withdraw your consent at any time by contacting the INTO Data Protection Officer by writing to INTO Data Protection Officer, 35 Parnell Square, Dublin 1 or by emailing dpo@into.ie		
Opt-out We would like to be able to contact you by email and text about INTO member newsletters and services. If you do not wish to be contacted by INTO please opt out by ticking the boxes provided: I do not wish to be contacted about INTO member newsletters and services by (please tick the relevant box if you do not wish to be contacted using this method): 1.Text 2. Email		

Date:

consenting to the INTO disclosing to my employer that I am a member of INTO.