

PLEASE NOTE: The member is CURRENTLY REGISTERED as indicated in the block to the right and may not be remunerated in a category lower than the category indicated:

CATEGORY OF REGISTRATION

**REGISTRATION OF NEW EMPLOYEE
(OR CHANGE OF PARTICULARS)**



THIS APPLICATION FOR REGISTRATION CAN ONLY BE PROCESSED IF A COPY OF THE APPLICANT'S IDENTITY DOCUMENT, PASSPORT OR PERMIT IS ATTACHED.

BIBC EMPLOYER NUMBER

BIBC MEMBER NUMBER

EMPLOYEE DETAILS														
SARS TAX REFERENCE NO.														
SURNAME														
FIRST NAMES														
NATIONALITY - IF NOT S.A., STATE COUNTRY OF ORIGIN	SOUTH-AFRICAN				OTHER									
RSA ID NUMBER/DATE OF BIRTH														
PASSPORT / PERMIT NUMBER														
TELEPHONE/MOBILE NUMBER									GENDER					
									MALE		FEMALE			
OCCUPATION														
MEMBER EMAIL ADDRESS														
ADDRESS														
LANGUAGE PREFERENCE	ENGLISH		AFRIKAANS		XHOSA		OTHER							
NAME OF EMPLOYER														
ELECTRONIC PAYMENTS (EFT):	PLEASE INCLUDE A COPY OF YOUR ID DOCUMENT / PASSPORT / PERMIT, AND BANK STATEMENT FOR THIS PURPOSE													

I hereby confirm that any fraudulent documentation discovered by the BIBC, or Department of Home Affairs could affect my BIBC benefit pay-out. By signing this form, I authorise the BIBC to process and distribute my personal information as per the POPI Act (Act no 3 of 2013) within the mandate of the BIBC.

SIGNATURE OF EMPLOYEE

DATE

SIGNATURE OF BIBC OFFICIAL

ONLY APPLICABLE TO REGISTRATION OF FOREIGN NATIONALS

I, the Employer of the abovementioned employee, hereby confirm, that I am aware of the implications of the South African Immigration Act 2002 (Act No 13 of 2002)

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SIGNATURE OF EMPLOYER

DATE

I nominate the following beneficiaries for my BIBC **RETIREMENT FUNDS**:

BENEFICIARY DETAILS

NAME AND SURNAME	RELATIONSHIP	IDENTITY NUMBER	ADDRESS

New Registration form applicable from 1/3/2021 - Only the Pension Fund option is available to employees due to a change in legislation.