



**MALTA UNION OF TEACHERS**  
TEACHERS' INSTITUTE, 213 Republic Street, Valletta VLT 1118, Malta.  
Tel: (356) 21237815, 21222663  
e-mail: [info@mut.org.mt](mailto:info@mut.org.mt) • Website: <http://www.mut.org.mt>

**SEPA DIRECT DEBIT MANDATE**

CREDITOR ID: MT17ZZZ000111001C

MANDATE REFERENCE: \_\_\_\_\_  
(To Be Filled in by Secretary)

*By signing this mandate form, you authorise the Malta Union of Teachers to send instructions to your bank to debit your account for membership fee, and your bank to debit your account in accordance with the instructions from the Malta Union of Teachers.*

*As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited.*

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Name(s) of Account Holder: \_\_\_\_\_

Membership Number \_\_\_\_\_

ID Card Number \_\_\_\_\_

Address \_\_\_\_\_

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IBAN \_\_\_\_\_

BIC Code \_\_\_\_\_

Type of Payment: Recurrent

Your rights regarding the above mandate are explained in a statement that you can obtain from your bank.

Place: Valletta Time and Date of Signature: \_\_\_\_\_

Signature \_\_\_\_\_

Kindly send your application from by post/ hand to:  
Malta Union of Teachers, Teachers' Institute, 213, Republic Street, Valletta, VLT1118.