



Membership Application Form

Name _____ Employee # _____

Address _____ City _____

Postal Code _____ Phone # _____

Start Date _____ Work e-mail: _____

Job Title _____ Phone Ext # _____

Staff
 Contract
 Part-time
 Freelance

Private e-mail: _____

I confirm that all information is accurate and I have paid the \$10 Membership Fee.

I hereby agree to abide by the Unifor Constitution, the Bylaws, and Collective Agreement as set forth by Local 72M. Furthermore, I shall enjoy all of the rights and privileges herein as a member of the Union and the Local.

(Signature)

(Today's Date)

Please securely deliver this form to any Executive Board Member.

OFFICE USE ONLY

Proposed by		Steward Group	
Date of Motion		Scanned	
In Database		New Member Package	
Fee to Treasurer		Mailing List	