

## Member Application Payroll and COPE Authorization

## YES! I want to JOIN SEIU Local 1021!

Please Print Clearly (ABOVE EACH LINE) using a black or blue ink pen

		-		EMPLOYER NAME
FIRST NAME	M.I.	LAST NAME	EMPLOYEE #	
HOME ADDRESS				
CITY	ZIP CODE		BIRTH DATE	
use automated calling tec	eive updates by text a hnologies and/or text lerts. Carrier message	t message me on my cellu e and data rates may appl	WORK EMAIL erstand that SEIU and its locals a lar phone on a periodic basis. SE y to such alerts. Text STOP to 55	:IU will never
( ) WORK PHONE	EXT.	CLASSIFICATION/	TITLE FT/PT	
WORKSITE/LOCATION		DEPARTMENT	HIRE [	DATE
of initial and continued el membership. Service fee	mployment, shall eith payers will not receiv on and forwarded to	ner join the Union or pay a ve the rights and benefits	epresented by SEIU Local 1021, a service fee equivalent to fees/ of union membership. If such p is the obligation of the employe	dues in lieu of ayments are not
SIGNATURE OF EMPLOY	EE		DATE	
To be deducted per pay p Action Fund and to forwa This authorization is volur Union nor of employment and make contributions a elections and ballot initiat	COPE (Commit I hereby authorize \$5.10 \$10 \$10 \$10 \$10 \$10 \$10 \$10 \$10 \$10 \$	tee on Political Education my employer to deduct to provide the regular dues deduction U Local 1021.  tand that contributions to 1021 will use the money it inditures in connection with mitted by law. This author		membership in the , issue advocacy gh SEIU COPE) til revoked by me in
SIGNATURE			DATE	
Processed by Union	Process	ed by Employer	DAIL	