

AFFILIATION APPLICATION FORM



Local No: _____

Date: _____

Name of Employer: _____

Sector and Sub-sector					
Education <input type="checkbox"/>	Health Care <input type="checkbox"/>	Municipal <input type="checkbox"/>	Social Services <input type="checkbox"/>	University <input type="checkbox"/>	Airlines <input type="checkbox"/>
<i>Custodial/Maintenance</i> <input type="checkbox"/>	<i>Ambulance</i> <input type="checkbox"/>	<i>Ambulance</i> <input type="checkbox"/>	<i>A.C.L.</i> <input type="checkbox"/>	<i>Academic</i> <input type="checkbox"/>	<i>Flight Attendants</i> <input type="checkbox"/>
<i>Education Assistants</i> <input type="checkbox"/>	<i>CCAC Homecare</i> <input type="checkbox"/>	<i>Electrical Utility</i> <input type="checkbox"/>	<i>C.A.S.</i> <input type="checkbox"/>	<i>Food Service/Contract</i> <input type="checkbox"/>	<i>Other</i> <input type="checkbox"/>
<i>E.S.L. & Heritage Instructors</i> <input type="checkbox"/>	<i>Hospital</i> <input type="checkbox"/>	<i>Inside</i> <input type="checkbox"/>	<i>Child Care</i> <input type="checkbox"/>	<i>Library</i> <input type="checkbox"/>	
<i>Office/Clerical/Technical</i> <input type="checkbox"/>	<i>Long Term Care</i> <input type="checkbox"/>	<i>Library</i> <input type="checkbox"/>	<i>Community Agency</i> <input type="checkbox"/>	<i>Student Services Union Council</i> <input type="checkbox"/>	
	<i>Public Health</i> <input type="checkbox"/>	<i>Long Term Care</i> <input type="checkbox"/>	<i>Municipal Social Services</i> <input type="checkbox"/>	<i>Tech/Trades Custodial</i> <input type="checkbox"/>	
		<i>Outside</i> <input type="checkbox"/>	<i>W.S.I.B.</i> <input type="checkbox"/>	<i>Office/Clerical/Technical</i> <input type="checkbox"/>	
		<i>Public Health</i> <input type="checkbox"/>			
		<i>Public Transit</i> <input type="checkbox"/>			

(Please designate mailing address below)

PRESIDENT:			
HOME ADDRESS:			
	postal code		
Home Phone:	Work Phone:		
Fax:	Cell Phone:		
Email:	*Would you like that we contact you regarding campaigns relevant to your local/area/sector via text messaging? <input type="checkbox"/>		

SECRETARY:			
HOME ADDRESS:			
	postal code		
Home Phone:	Work Phone:		
Fax:	Cell Phone:		
Email:	*Would you like that we contact you regarding campaigns relevant to your local/area/sector via text messaging? <input type="checkbox"/>		

TREASURER:			
HOME ADDRESS:			
	postal code		
Home Phone :	Work Phone:		
Fax:	Cell Phone:		
Email:	*Would you like that we contact you regarding campaigns relevant to your local/area/sector via text messaging? <input type="checkbox"/>		

MARK IF YOU WANT MAIL TO GO TO YOUR UNION ADDRESS

LOCAL UNION ADDRESS:			
	postal code		
Local Union Phone:	Local Fax:		
Local Email:			
Local Facebook page:	Local Twitter handle:		

