



I.B.O.T.U. APPLICATION FOR MEMBERSHIP

I hereby apply for membership in Local 713 I.B.O.T.U. and authorize and designate this Union to represent me regarding my job and benefits.

First Name	M.I.	Last Name	Suffix	Date of Birth / /	Gender	Last 4 Digits of SSN/ITIN
Mailing Address – No PO Box			City		State	Zip Code Apt.
Cell Phone (Include Area Code) () -		Home Phone (Include Area Code) () -		Email Address		Employer Name
Applicant Signature X						Date / /

I.B.O.T.U. Check-Off Authorization

This Check-Off Authorization is separate and apart from the Membership Application and is attached to the Membership Application only for convenience.

I, the undersigned, hereby apply for membership in the above Local Union and I authorize said Local Union to represent me for the purpose of collective bargaining, and I voluntarily authorize and direct my Employer to deduct from my wages initiation fees, monthly dues, and assessments, to become due to it as the periodic dues, initiation fees and assessments uniformly required by said Local Union as a condition of acquiring or maintaining membership, and in compliance with the Labor-Management Relation Act of 1947.

This voluntary authorization and assignment shall be irrevocable for the period of one (1) year or until the termination of the collective bargaining agreement between my Employer and said Local Union, whichever occurs sooner, and I agree and direct that this voluntary authorization and assignment shall be automatically renewed, and shall be irrevocable for successive periods of one (1) year each or for the period of each succeeding applicable collective bargaining agreement between my Employer and said Local Union, whichever occurs sooner, unless written notice by certified mail is given by me to the Local Union and my Employer not more than twenty (20) days and not less than ten (10) days prior to the expiration of each period of one (1) year, or of each applicable collective bargaining agreement between my Employer and said Local Union, whichever occurs sooner, regardless of whether I am or remain a member of the Local Union.

You have a right to be a nonmember of the above Local Union and nonmembers have the right to (1) object to paying a fraction of the Local Union dues and fees that are not germane to Local Union's duties as bargaining agent, and to obtain a reduction of fees for such non-germane activities, (2) to obtain from Local Union sufficient information to enable you to decide whether to object to Local Union's fair share dues and fee equivalency calculation, and (3) to be told the Local Union's internal procedure for objection. Items (2) and (3) may be obtained by written request to the Local Union address provided above. You should be aware that exercising the option of becoming a nonmember means you will not have the right to vote on your contract, to participate in the development of contract proposals, or vote in Local Union elections.

Should any part of this Application and Check-off Authorization card be declared invalid or unenforceable by a court of competent jurisdiction or the National Labor Relations Board, the remaining parts shall be binding upon you and Local 713.

Member Signature X	Date / /
Print Name	Last 4 Digits of SSN/ITIN