

## Canadian Union of Public Employees Application for Membership in CUPE Local 4070

APPLICANT INFORMATION										
Last Name:						First Name:				
Male			Female							
Addre	ss:									
City:					Province:	Postal		Code:		
Telephone (Home):					Telephone (Work):		):			
Personal E-mail:										
EMPLOYMENT INFORMATION										
Employer: Westjet										
Employer address: 22				22 Aerial Place NE						
City:	Cal	gary			Province:	Alberta	Postal	Code:	T2E 3J1	
Classification:										
Department:										
Full-time			Part-time Casual/Relief							
DECLARATION										
<ul> <li>i) apply for membership in the Canadian Union of Public Employees and its Local 4070 and agree to abide by its Constitution and By-laws;</li> <li>ii) authorize the Union to be my exclusive bargaining agent;</li> <li>iii) hereby tender \$ 5.00 as payment of the initiation fee.</li> </ul>										
Signature of applicant:								Date:		
On behalf of the Union, I hereby accept this application and acknowledge receipt of \$ 5.00 as payment of the initiation fee.										
Signa	ture	(on b	ehalf	of the Union):				Date:		



## Canadian Union of Public Employees Application for Membership in CUPE Local 4070

**PLEASE PRINT AND MAIL:** 

Canadian Union of Public Employees 1375 St. Laurent Blvd. Ottawa, ON K1G 0Z7

**ATTN: ORGANIZING & REGIONAL SERVICES** 

This form is confidential. It goes to the CUPE Organizing Department.

THE EMPLOYER NEVER SEES THE FORM OR KNOWS WHO SIGNED A FORM.

A CUPE organizer will contact you by telephone to verify the information contained on this form and will then witness your signature.