



# MEMBERSHIP APPLICATION FORM

## Stand Together for Strength, Job Security and Respect on the Job

If winning better pay, benefits and respect on the job sounds good to you, be sure to sign this union card. Uniting with our co-workers and joining SEIU Local 99 is the best way to negotiate improvements in your job. Together, when management sees that the union has the full support of all workers, we can all do better.

**Take on the boss to raise pay, improve benefits and win respect.** If we all join together in our union, we'll have the strength to win health care, job security and respect for everyone. There is strength in numbers. The more of us who belong to our union, the more management respects us and the stronger our voice is at the bargaining table.



**Protect quality education services.** Healthy and safe schools begin with us. Our co-workers, students, parents and community members need our ideas and experience. Workers like us are responsible for making schools work. We have a contribution to make as active union members.

MEMBERSHIP APPLICATION

Name \_\_\_\_\_ Employee # \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone # \_\_\_\_\_ Date of Birth [optional] \_\_\_\_\_

E-mail \_\_\_\_\_

Worksite \_\_\_\_\_ Job Title \_\_\_\_\_

Work Hours \_\_\_\_\_ Class Code \_\_\_\_\_ Loc Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**SIGN ON BACK**

YES, I am interested in volunteering on future political or legislative campaigns.

### Official Use

Organizer/Representative \_\_\_\_\_

Steward/MPO \_\_\_\_\_ Employee ID \_\_\_\_\_

**TEAR ALONG DOTTED LINE**

### KNOW YOUR RIGHTS

If your Supervisor or Administrator wants to meet, you should:

- Ask about the topic and purpose of the meeting.
- Have a Union Representative (Steward or Representative/Organizer) present.

What is discipline?

- A verbal or written reprimand, counseling, suspension or termination.

Your Responsibility:

- Ask for a Union Representative.
- You do not have to answer any questions unless a representative is present.
- Meet with management. You may ask for a postponement of the meeting.
- Never refuse to meet. This is insubordination and a reason for being fired.

PROTECT YOURSELF AND YOUR CO-WORKERS  
Share this information



## MEMBERSHIP CARD

NAME: \_\_\_\_\_

EMP ID#: \_\_\_\_\_

Subject to eligibility status.

**tear along line**

I hereby make application for membership in the Service Employees International Union, Local 99, SEIU. I hereby authorize my employer to deduct from my salary, per pay period **the current SEIU Local 99 dues**, including subsequent dues changes as duly adopted by SEIU Local 99 members. I further understand and agree that the Employer or its representative acting under this authorization shall not be liable in any manner for failure or delay on its part in making the deduction herein authorized.

Dues, fees, assessments, contributions or gifts to SEIU Local 99 are not deductible as charitable contributions for federal income tax purposes. Dues paid to Service Employees, Local 99, however, may qualify as business expenses, and may be deductible in limited circumstances subject to various restrictions imposed by the Internal Revenue code.

You are hereby authorized to make a deduction from my salary, in the total amount indicated for organization dues, and transmit the deduction to Service Employees, Local 99. This authorization shall remain in force until cancelled by written notice from Service Employees, Local 99.

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

Employee No. \_\_\_\_\_ Approved by \_\_\_\_\_

I hereby authorize my Employer to deduct the above indicated amount shown below. By my signature, I state that I have reviewed and agreed with the term set forth below. I authorize my local union to file this payroll deduction with my employer and for my employer to forward the amount specified to SEIU COPE \$3\_\_\_\_ \$5\_\_\_\_ \$10\_\_\_\_ \$Other\_\_\_\_.

I understand that: 1) I am not required to sign this form or make COPE contributions as a condition of my employment by my employer or membership in the union; 2) I may refuse to contribute without any reprisal; 3) Only union members and union executive/administration staff who are U.S. citizens or lawful permanent residents are eligible to contribute to SEIU COPE; 4) The contribution amounts on this form are merely a suggestion, and I may contribute more or less by this or some other means without fear of favor or disadvantage from the union or my employer; 5) SEIU COPE uses the money it receives for political purposes, including but not limited to addressing political issues of public importance and contributing to and spending money in connection with federal, state and local elections.

Contributions to SEIU COPE are not deductible for federal income tax purposes. This authorization shall remain in effect until revoked in writing by me.

Employee Signature \_\_\_\_\_  Date \_\_\_\_\_

**fold along line**



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**BUSINESS REPLY MAIL**  
FIRST-CLASS MAIL PERMIT NO. 43723 LOS ANGELES, CA 90005

POSTAGE WILL BE PAID BY

**SERVICE EMPLOYEES UNION, LOCAL 99**

2724 W 8th St

LOS ANGELES CA 90005-1225



**tear along line**

SEIU Local 99 online at  
**seiu99.org**

**Handy Phone Numbers**

SEIU Local 99  
phone (213) 387-8393  
fax (213) 388-4707

SEIU Edge Program  
(800) 448-7348

**What do your dues pay for?**

- A VOICE ON THE JOB: Together we can fight for better salaries, benefits and working conditions.
- A CONTRACT: A legally binding document that establishes employment conditions.
- INFORMATION: Current events, pending & new legislation, changes in your job requirements & duties.
- AN ADVOCATE: Grievances and Disciplinary Handling
- FAMILY FUN DISCOUNTS: Theme Parks, movie tickets, etc.
- PROGRAMS THAT MEET THE NEEDS OF THE MEMBERS: Trade Tech classes, Labor Management Committees, CPR & First Aid Classes.