




# LOCAL 363, ELECTRICAL WORKERS OF AMERICA, USWU, IUJAT, and Related Funds

138-50 Queens Boulevard, Briarwood, New York 11435

SHOP NUMBER

1 EMPLOYEE INFORMATION				
LAST NAME		FIRST NAME		MIDDLE INIT.
SEX	DATE OF BIRTH	MARITAL STATUS	YOUR SOCIAL SECURITY NO.	
HOME ADDRESS			APT. NO.	
CITY, STATE		ZIP CODE	HOME TELEPHONE	
COMPANY NAME			WORK TELEPHONE	
COMPANY ADDRESS		ZIP CODE	DATE OF HIRE	
EMAIL				

3 APPLICATION FOR MEMBERSHIP

<b>UNITED SERVICE WORKERS UNION LOCAL 363, ELECTRICAL WORKERS OF AMERICA</b>
I apply for membership in USWU Local 363, IUJAT, and designate this Union to represent me for collective bargaining with my employer.
Date: _____ Signature: <b>X</b> _____
<b>CHECKOFF AUTHORIZATION</b>
I direct my employer to deduct from my wages and to pay to USWU Local 363, IUJAT, dues and initiation fees in said Union as may be established by the Union and become due to it from me during the effective period of this authorization. This authorization may be revoked by me by written notice signed by me as of any anniversary date hereof or termination date of any collective bargaining agreement covering my employment, whichever occurs sooner. This authorization shall automatically renew unless written revocation is submitted.
Date: _____ Signature: <b>X</b> _____
SEE IMPORTANT NOTICE ON REVERSE REGARDING LEGAL RIGHTS

4 UNITED SERVICE WORKERS UNION SECURITY FUND (IF APPLICABLE)		
BENEFICIARY NAME FIRST NAME LAST NAME	BENEFICIARY RELATIONSHIP	BENEFICIARY ADDRESS
PRIMARY:		
SECONDARY:		
SECONDARY:		
Date: _____ Signature: <b>X</b> _____		