

Member Application Payroll and COPE Authorization

YES! I want to JOIN SEIU Local 1021!

Please Print Clearly (ABOVE EACH LINE) using a black or blue ink pen

			EMPLOYER NAM
FIRST NAME	M.I.	LAST NAME	EMPLOYEE #
HOME ADDRESS			
CITY	ZIP CODE		BIRTH DATE
() CELL PHONE	НОН	1E EMAIL	WORK EMAIL
() WORK PHONE	EXT.	CLASSIFICATION/T	TITLE FT/PT
WORKSITE/LOCATION		DEPARTMENT	HIRE DATE
or salary and to transmit as certified by the Union. However, they may be de agreement between the I of initial and continued e membership. Service fee	to SEIU 1021 the auth Contributions or gift ductible as ordinary Employer and SEIU L mployment, shall eith payers will not receiven and forwarded to	norized membership dues, ts to SEIU Local 1021 are no and necessary business ex local 1021, all employees re ther join the Union or pay a we the rights and benefits	In hereby authorize you to deduct from my wages, fees, service fee equivalent and/or contributions not tax deductible as charitable contributions. Expenses. Pursuant to state law and the current epresented by SEIU Local 1021, as a condition a service fee equivalent to fees/dues in lieu of of union membership. If such payments are not is the obligation of the employee to make the
SIGNATURE OF EMPLOYE	 EE		DATE
YE	COPE (Commit I hereby authorize	ttee on Political Education my employer to deduct fi	•
To be deducted per pay p Action Fund and to forwa			n as a voluntary contribution to SEIU COPE Politica
Union nor of employment and make contributions a elections and ballot initiat	, and that SEIU Local nd independent expe iives to the extent pe . Contributions to the	1021 will use the money it enditures in connection with rmitted by law. This author	this fund are not a condition of membership in the receives for member education, issue advocacy th local, state and federal (through SEIU COPE) rization shall remain in effect until revoked by me i plitical Action Fund are not deductible as charitable
SIGNATURE			DATE
Processed by Union	Process	ed by Employer	