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| Unifor Local 594 New Members |  |
|  |  |  |  |  |  |
|  |  |  |  | Date: |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| First Name: |  | Initial: |  | Last Name: |  |
|  |  |  |  |  |  |  |  |  |  |
| Address: |  | City: |  |
|  |  | Province: |  |
|  |  | Postal Code: |  |
|  |  |  |  |  |  |  |  |  |  |
| Home Phone:  |  | Cell Phone: |  |
|  |  |  |  |  |  |  |  |  |  |
| Email: |  | Department: |  |
|  |  |  |  |  |  |  |  |  |  |
|  | Please sign me up to receive email communications from Unifor Local 594. Communications include monthly meeting reminders, current local issues, current national issues, bargaining and work action updates. |
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| I consent to using the information on this form for the purposes of representing me. |
|  |  |  |  |  |  |  |  |  |  |
| I hereby freely accept membership into Unifor Local 594 and pledge to comply with its constitution and policies. I authorize Unifor Local 594 to act on my behalf as a bargaining agent. |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |
| Signature of Applicant |  | Signature of Witness |
|  |  |  |  |  |  |  |  |  |  |
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