Application for Membership USA

OBLIGATION OF I.B.E.W.®

"I, the undersigned, in the presence of members of the International Brotherhood of Electrical Workers®, promise and agree to conform to and abide by the Constitution and laws of the I.B.E.W.® and its Local Unions. I will further the purposes for which the I.B.E.W.® is instituted. I will bear true allegiance to it and will not sacrifice its interest in any manner."

APPLICATION DATE (mm/dd/yyyy)

☐☐ / ☐☐ / ☐☐☐☐ ____

TO BE SIGNED BY APPLICANT - PLEASE DO NOT PRINT

[PLEASE PRINT OR TYPE FULL NAME]

☐ MR ☐ MS ☐ MRS FIRST NAME

M.I.

☐ JR ☐ III ☐ SR ☐ IV ☐ II ☐ V

LAST NAME

ADDRESS (STREET & NUMBER)

CITY

STATE

ZIP CODE+4 ☐☐☐☐☐ - ☐☐☐☐

EMAIL ADDRESS

DATE OF BIRTH (mm/dd/yyyy) ☐☐ / ☐☐ / ☐☐☐☐

DATE OF HIRE (mm/dd/yyyy) ☐☐ / ☐☐ / ☐☐☐☐

SOCIAL SECURITY NO. ☐☐☐ - ☐☐ - ☐☐☐☐

TELEPHONE NO. (☐☐☐) ☐☐☐ - ☐☐☐☐

PRESENT EMPLOYER

CLASSIFICATION

INDUSTRY WHERE YOU ARE EMPLOYED

- ☐ RAILROAD
- ☐ GOVERNMENT
- ☐ INSIDE CONSTRUCTION & MAINTENANCE
- ☐ OUTSIDE CONSTRUCTION & MAINTENANCE
- ☐ UTILITY
- ☐ TELECOMMUNICATIONS
- ☐ BROADCASTING
- ☐ MANUFACTURING

HOW DID YOU BECOME AN I.B.E.W.® MEMBER? [SELECT ONE]

- ☐ I WAS ORGANIZED
- ☐ I WAS ORGANIZED AS AN APPRENTICE
- ☐ I WAS SELECTED FOR AN APPRENTICESHIP
- ☐ I AM A NEW HIRE
- ☐ OTHER

Gender*

- ☐ MALE
- ☐ FEMALE

REGISTERED VOTER?

- ☐ DEMOCRAT
- ☐ REPUBLICAN
- ☐ INDEPENDENT
- ☐ OTHER
- ☐ NOT REGISTERED

HAVE YOU EVER BEEN A MEMBER OF THE I.B.E.W.®?

☐ YES ☐ NO

IF SO, WHERE? LOCAL UNION ☐☐☐☐ STATE ☐☐

RACE*

- ☐ WHITE
- ☐ HISPANIC ORIGIN
- ☐ BLACK
- ☐ AMERICAN INDIAN
- ☐ ASIAN
- ☐ PACIFIC ISLANDER
- ☐ OTHER

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* This identification is for
statistical purposes only, will be
kept confidential, and will not be
used for any purpose that would
violate Title VII of the Civil
Rights Act of 1964, as amended.
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THIS PORTION TO BE FILLED IN BY L.U. FINANCIAL SECRETARY

EMPLOYEE NUMBER (IF APPLICABLE)

INITIATION DATE (mm/dd/yyyy) ☐☐ / ☐☐ / ☐☐☐☐

TYPE OF MEMBERSHIP ☐ "A" ☐ "BA"

INITIATION FEE PAID $ ☐☐☐ . ☐☐

INITIATION FEE DUE $ ☐☐☐ . ☐☐

IO SHARE (1/2 TO $60) $ ☐☐☐ . ☐☐

CARD NUMBER

PAID $2.00 PENSION ADM. FEE? ☐ YES ☐ NO

NUMBER OF PAYMENTS MADE WITH THIS APPLICATION ☐☐

LOCAL UNION ☐☐☐☐

Form No. 107 12/03

Submit