

## APPLICATION FOR MEMBERSHIP TO CUPE LOCAL 402

•	Last name				First name	е			
•	Address								
	City				Province		Postal Code		
•	Phone ce	Phone cell			Phone ho	me			
•	Personal	Personal Email address							
	Employe	Employer City of Surrey							
•	Employer address 13450 104 Ave.,								
	City Su	City Surrey			Province	ВС	Postal Code	V3T 1V8	
•	Work Phone								
Classification/Department									
Full time Part Time Casual									
DECLARATION									
I, the undersigned:									
Apply for membership in the Canadian Union of Public Employees and its Local $\underline{402}$ and agree to abide by its constitution and bylaws.									
If accepted into membership, I promise to support and comply with the Constitution of this Union, to work to improve the economic and social conditions of other members and other workers, to defend and work to improve the democratic rights and liberties of workers and that I will not purposely or knowingly harm or assist in harming another member of the Union.									
Арр	licant Sigr			Day/Month/Yea	Day/Month/Year				
	ness Signa pehalf of t				Day/Month/Year	Day/Month/Year			

Save as: SURNAME, First - Cupe form / Email to: cupeoffice@cupe402.com