

International Association of Machinists & Aerospace Workers

PLEASE PRINT

Name _____ Telephone _____

Address _____

Employer _____ Institution _____

I hereby request and accept membership in the International Association of Machinists and Aerospace Workers and hereby authorize its representatives to bargain for me in all matters pertaining to my employment.

EMAIL: _____

S.I.N. _____ Signature of Applicant _____

Day. _____ Month _____ Year _____

Date of Application.

Signature of Collector



RECEIPT **\$5.00**

International Association of Machinists
and Aerospace
Workers

Received from _____

Received by _____

DATE

Day _____ Month _____ Year _____

