



# MEMBERSHIP FORM

NEW MEMBER     RETIRED MEMBER     ASSOCIATE MEMBER

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ DOB: \_\_\_\_\_

Work Email: \_\_\_\_\_ Personal Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Please send me important news via text message alerts.

Department/Program/Agency: \_\_\_\_\_

Work Location/Address: \_\_\_\_\_

## MEMBERSHIP APPLICATION

Effective immediately, I hereby request and accept membership in Service Employees International Union (SEIU) Local 509 – and authorize SEIU Local 509 to act as my exclusive representative in collective bargaining over wages, benefits, and other terms and conditions of employment. I agree to be bound by the Constitution and Bylaws of the Service Employees International Union and SEIU Local 509. I understand that in order to establish and maintain membership in good standing, I am obligated to pay dues and assessments as duly adopted by SEIU Local 509.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## DUES CHECK-OFF AUTHORIZATION

I hereby authorize and direct my employer to deduct from my earnings – and to transmit to Service Employees International Union (SEIU) Local 509 – membership dues in the amount established or revised by SEIU Local 509 in accordance with the SEIU Local 509 Constitution and Bylaws. If for any reason my Employer fails to make a deduction, I authorize the Employer to make such deduction in the subsequent payroll period. SEIU Local 509 is authorized to deposit this authorization with my current Employer(s) and with any other Employer(s) under contract with Local 509 in the event I change Employer or obtain additional employment – and is authorized to redeposit this authorization with any Employer under contract with Local 509 if my employment with that Employer terminates and I am later rehired.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Mail completed form to:** SEIU Local 509

ATTN: Membership Dept.

293 Boston Post Road West, 4th Floor

Marlborough, MA 01752 or as a scanned attachment to [ccarroll@seiu509.org](mailto:ccarroll@seiu509.org)

Membership in The Massachusetts Union for Human Service Workers and Educators – SEIU Local 509 – is without regard to race, color, gender, sexual orientation, age, disability, religion, national origin, political belief or affiliation. Union dues, contributions or gifts to SEIU Local 509 are not tax deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses. SEIU will never charge you for text message alerts, but carrier message and data rates may apply. Text STOP to 787753 to unsubscribe, and HELP for more info. Periodic updates, not to exceed 5 per month.

