



(Must be completed in full)

I hereby apply for Membership in the **West Vancouver Municipal Employees' Association** ("the Association"). In applying for a membership, I understand that the Association is certified as my exclusive bargaining agent and to represent me in collective bargaining. If accepted, I agree that I will abide by the provisions of the Constitution of the Association and further, agree to conform to the rules and By-laws of the Association.

On occasion, the Association may publish members' names (i.e. welcome new member, birth announcements, retirement, etc.) Such publication will be limited and for Association purposes only.

Do not publish my name or personal information for any reason.

Full Name

Age..... Date of Birth.....
(Day / Month / Year)

Classification.....Dept.....

Employer.....F/T.....P/T.....Casual.....Temp
Library, Municipality, Police, School

Have you ever applied to be a member of WVMEA? Y N

Address.....
(Apt No.) (Street)

(City) (Province) (Postal Code)

Personal Email Address.....

Home Telephone #.....

Date.....Signature.....

Name of Employee:

Effectiveand until this authority is revoked by me in writing, I hereby authorize you to deduct from my wages and pay to the **WEST VANCOUVER MUNICIPAL EMPLOYEES' ASSOCIATION** fees and dues in the amounts following:

Initiation Fee: \$50.00 (as set in accordance with Association By-Laws)
Dues per Month: 1.5 % (% of gross earnings as set out in By-Laws)

I further authorize you to deduct from my wages and pay to the said Association such further increased fees and dues or assessments as may be agreed upon from time to time at any regularly constituted meeting of the said Association or any arrears that may be outstanding and notified to you in writing by the Secretary of said Association.

Date Signature