



APPLICATION FOR MEMBERSHIP

in

LOCAL UNION NO. 772

**1030 Upper James Street, Suite 401 Hamilton, ON L9C 6X6
1.800.286.0422**

DATE _____ 20__

Having formed a favourable opinion of your Union, I hereby make application to become a member thereof and if accepted I agree as follows: That I will remain until expelled; that I will not violate any of the provisions of the Constitution, Rituals, By-Laws, Customs, Rules, or Mandates of the corporation, or any contract or agreement which provides for the withdrawal of my membership from this Union; I further agree in the event of a claimed grievance against the Union to faithfully observe the procedure of, and, within the provisions of the International Constitution, fully accept as final the findings of the Trial Boards within the order; I further agree to conform to and abide by all laws, rules and regulations and orders stipulated in the Constitution and By-Laws, or given by these in authority.

NAME _____ DATE OF BIRTH _____

RESIDENCE _____ CITY _____ POSTAL CODE _____

TELEPHONE () _____ E-MAIL _____

EMPLOYED BY _____

**WITNESS _____ SIGNATURE _____
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