

\*\*\*\*\*APPLICATION FOR MEMBERSHIP\*\*\*\*\*

TO THE OFFICERS AND MEMBERS OF THE INLANDBOATMEN'S UNION OF THE PACIFIC:

Desiring to associate myself with Organized Labor and realizing that only through such association can I be of real service to others, as well as myself, I hereby request the privilege of becoming a member of the Inlandboatmen's Union of the Pacific and do pledge myself, if admitted to conform to and abide by all the laws, rules and regulations thereof.

Name: \_\_\_\_\_ SS#: \_\_\_\_\_  
(Please print)

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Tel#: \_\_\_\_\_

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Cell#: \_\_\_\_\_

E-Mail#: \_\_\_\_\_ Male [ ] Female [ ]

Date first employed: \_\_\_\_/\_\_\_\_/\_\_\_\_ Position/Dept: \_\_\_\_\_

Company: (circle one) AMHS, KKGB, JORE, CITY OF UNALASKA, ALASKA NAUTICAL,  
CROWLEY ALASKA OTHER: \_\_\_\_\_

Pending my final acceptance as a member, I hereby designate the Inlandboatmen's Union of the Pacific as my Exclusive representative for purposes of collective bargaining.

This will authorize the Employer to release my contact information and updates to the Union, who agrees to hold such information confidential as per State Law, the I.B.U.-P Constitution and the Contract.

APPLICANTS SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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TO AUTHORIZE AUTOMATIC PAYROLL DEDUCTION OF DUES, OR DUES AND INITIATION FEES, PLEASE CHECK THE APPROPRIATE BOX AND SIGN BELOW:

- This will authorize my Employer to deduct from my paycheck my **annual seasonal permit fee of \$300.00 minimum per year, and my monthly dues**. I further authorize my Employer to deduct my annual seasonal permit fee each succeeding year until the entire \$900.00 initiation fee is paid in full by the completion of my third year according to my permit date (date of hire).
- This will authorize my Employer to deduct from my paycheck my **monthly Union dues only**. I understand that it will be my responsibility to pay my annual seasonal permit fee each year (a minimum of \$300.00 per year) until the entire \$900.00 initiation fee is paid in full by the completion of my third year according to my permit date (date of hire)

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Mail completed form to: IBU National Office, 1711 W. Nickerson St. #D, Seattle, WA 98119  
IBU Alaska Regional Office, 880 Glacier Hwy #112, Juneau, AK 99803  
IBU Ketchikan Office: P O Box 630, Ketchikan, AK 99901