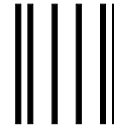


Fold here, tape and mail. (This flap should be on the **inside**.)

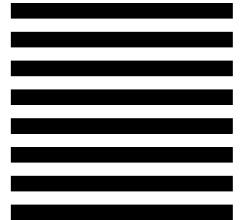
NEW MEMBER APPLICATION



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Membership Application

Service Employees International Union Local 1000

1808 14th Street • Sacramento, CA 95814

Phone (916) 554-1200 or Toll Free (866) 488-SEIU (7248)

PLEASE TYPE OR PRINT

DLC

Last Name First Name Initial

Last 4 digits of Social Security No. Date of Birth (optional)

Date of Hire Ethnicity (optional)

Home Address

City ZIP Code

State Agency/Dept. Name (i.e., DMV)

Print Full Work Address Room No.

Classification Monthly Salary

() () ()
Business Phone Home Phone Cell Phone

Home E-mail Work E-mail

Recruiter Name Recruiter S.S.#

I hereby apply for membership in SEIU Local 1000 and hereby agree to abide by the SEIU Local 1000 bylaws and policy file. In becoming a member, I authorize the establishment with the appropriate agency the withholding from my pay or retirement allowance of dues and any benefit deductions. I understand that my membership rights are set forth in the SEIU Local 1000 policy file, which is subject to amendment by the union, and any applicable memorandum of understanding between SEIU Local 1000 and the state of California, and that a copy of the policy file and applicable memoranda of understanding are always available for my review. Membership includes transfers to certain co-affiliates of the union

Unless instructed to the contrary below, SEIU Local 1000 is hereby authorized to withhold from my pay an additional \$2.00 per month to support SEIU Local 1000's political activity in California.

By writing my initials in this box, I instruct SEIU Local 1000 *NOT* to withhold an additional \$2.00 per month for political activity.

Signature: _____ Date: _____

