

International Association of Machinists & Aerospace Workers

PLEASE PRINT

Name _____ **Telephone** _____

Address _____

Employer _____ **Institution** _____

I hereby request and accept membership in the International Association of Machinists and Aerospace Workers and hereby authorize its representatives to bargain for me in all matters pertaining to my employment.

S.I.N. _____ **Signature of Applicant** _____

Day. _____ **Month** _____ **Year** _____
Date of Application. _____

Signature of Collector _____



RECEIPT
International Association of Machinists
and Aerospace
Workers

Received from _____
Received by _____
DATE
Day _____ Month _____ Year _____

