



SEIU LOCAL 888 ASSOCIATE MEMBERSHIP APPLICATION

Legal Name: _____ SSN: (Last 4 digits only) _____

Birth Date: _____ Gender: Female Male

CONTACT INFORMATION:

Address: _____ Apt, Floor, Suite: _____

City: _____ State: _____ Zip Code: _____

Personal Email: _____ Home Phone: _____

Work Email: _____ Work Phone: _____

Best way to reach you: _____ Best Time: _____ Cell Phone: _____

Text Messaging (*Message and Data rates may apply*)

EMPLOYMENT INFORMATION:

Employer: _____

Department/Work Site: _____

Job Title: _____ Date of Hire: _____

I hereby make application to be an Associate Member of SEIU Local 888, Service Employees International Union, CTW, CLC. I hereby agree to pay SEIU Local 888 Associate Member dues in accordance with the [SEIU Local 888 Constitution and Bylaws](#). I agree to follow the Constitution and Bylaws of SEIU Local 888. I further authorize SEIU Local 888 to deduct dues in the manner designated below — and this authorization to deduct dues shall remain in full force and effect until revoked in writing by me.

Signature: _____ **Date:** _____

*(*Required if paying by check)*

ASSOCIATE MEMBER DUES:

Dues may be paid by check to:

Weekly: \$2.50

**SEIU Local 888
52 Roland Street, Suite 101
Boston, MA 02129**

Monthly: \$10.00

Yearly: \$120.00

To pay with a credit card:

Dues, fees, assessments, contributions or gifts to SEIU are not deductible as charitable contributions for federal income tax purposes. However, dues paid to SEIU may qualify as business expenses, and may be deductible, as allowed by the Internal Revenue Code.