



# Membership Application

2589 Interstate Drive, Harrisburg, PA 17110

Date received: _____
Date DA sent to employer: _____
Processed by: _____

NAME: \_\_\_\_\_ EMPLOYER: \_\_\_\_\_

DATE HIRED: \_\_\_\_\_ JOB TITLE: \_\_\_\_\_ DEPARTMENT: \_\_\_\_\_

PERSONAL E-MAIL: \_\_\_\_\_ CELL PHONE\*: \_\_\_\_\_ HOME PHONE\*: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_

SOCIAL SECURITY NUMBER (Last Four Only): \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ Work Site: \_\_\_\_\_

### YES! I want to join my fellow employees and become a member of SEIU Local 668.

I request and accept membership in SEIU Local 668 and I agree to abide by the SEIU Local 668 constitution and by-laws. I authorize SEIU Local 668 to act as my exclusive representative in collective bargaining over wages, benefits and other terms and conditions of employment with my employer. I understand that membership and dues deduction require separate authorizations. I also understand that dues deduction is a requirement for membership in SEIU Local 668 and that my financial obligations to SEIU Local 668 are governed by the provisions below.



\_\_\_\_\_ **Date:** \_\_\_\_\_

This voluntary authorization and assignment of dues deduction shall be irrevocable, regardless of whether I am or remain a member of the Union, for a period of one year from the date of execution and for year to year thereafter, unless I give the Employer and the Union written notice of revocation not less than ten (10) days and not more than thirty (30) days before the end of any yearly period; provided however, if the applicable collective bargaining agreement specifies a longer revocation period, then only that longer period shall apply. The applicable collective bargaining agreement will be made readily available. I acknowledge that my dues deduction authorization is a contractual agreement between myself, as a bargaining unit employee, and SEIU Local 668, separate from any statutory provisions of Act 195.



\_\_\_\_\_ **Date:** \_\_\_\_\_

**Direct Deposit Authorization, Public Sector:** I acknowledge that failure to pay my dues on a timely basis may affect my membership standing in the union, as set forth in the SEIU Constitution and Bylaws. In the event my employer ceases payroll deductions, I authorize SEIU Local 668 to bill my designated account at my financial institution, in accordance with the authorization provided below. SEIU Local 668 will notify me of the transition to direct pay at the current mailing address on file with SEIU Local 668 prior to initiating the first payment via checking or savings account as authorized below.

I hereby authorize SEIU Local 668 to initiate a recurring, automatic electronic funds transfer with my financial institution beginning on the date listed in the transition notice provided to me in order to deduct from the account the regular monthly dues and initiation fees uniformly applicable to members of SEIU Local 668.

To facilitate payment of the dues or other contributions from my bank account, I authorize my employer to provide to SEIU's Local 668 designated secure payment processor the information for the bank account (bank account number and routing number) on file with my employer ("Account") that I have designated to receive the proceeds of my paycheck via direct deposit. If my employer makes direct deposit of my paycheck to a checking account and a savings account, I hereby authorize my employer to provide the designated secure payment processor the information for the checking account and for my dues and/or other contributions to be deducted from this account. Contributions to SEIU Local 668 are not tax deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses.

In the case of checking and savings accounts, adjusting entries to correct errors is also authorized. I agree that these withdrawals and adjustments may be made electronically and under the Rules of the National Automated Clearing House Association. This direct deposit authorization shall remain in full effect until I revoke my dues authorization in accordance with applicable provisions set forth above.



\_\_\_\_\_ **Date:** \_\_\_\_\_

**\*By providing my phone number, I understand that SEIU and its locals and affiliates may use automated calling technologies and/or text message me on my cellular phone on a periodic basis. SEIU will never charge for text message alerts. Carrier message and data rates may apply to such alerts. Text STOP to 787753 to stop receiving messages. Text HELP to 787753 for more information.**

# Help Support Working Families!

**Yes!** I want to hold elected leaders accountable to working families and I know we can only do that if we stand together. I hereby authorize my employer to withhold the indicated amount bi-weekly to forward to SEIU Local 668 as a contribution to SEIU Committee on Political Education (SEIU COPE). My signature shows that I agree with the terms below.

\$10  \$7  \$5  Other: \_\_\_\_\_

Increase my Contribution to: \_\_\_\_\_

NAME: \_\_\_\_\_

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

**SIGN HERE** → \_\_\_\_\_

This authorization is made voluntarily based on my specific understanding that: 1) I am not required to sign this form or make voluntary contributions to SEIU COPE as a condition of my employment or membership in the union; 2) I may refuse to contribute without reprisal; 3) Under law, only union members and executive/ administrative staff who are U.S. Citizens or lawful permanent residents are eligible to contribute to COPE; 4) The contribution amounts on this form are merely suggestions, and I may contribute more or less by this or other means without fear of favor or disadvantage from SEIU or my employer; 5) SEIU COPE uses the money it receives for political purposes – including, but not limited to, making contributions to and expenditures on behalf of candidates for federal, state, and local offices – and addressing political issues of public importance. This authorization shall remain in effect until revoked by me in writing via U.S. mail to SEIU.

COPE Contributions are voluntary and may be terminated at any time via written notice to the Secretary-Treasurer.

Contributions or gifts to SEIU COPE are not tax deductible as charitable contributions.

YES! I want to be more involved in my union.

Let me know how I can be a leader, help my coworkers, and help ensure fairness for all in the workplace.

*For Internal Purposes Only:*

Organizer: \_\_\_\_\_

Date: \_\_\_\_\_

Notes:

*SEIU Local 668: SEIU Local 668 represents nearly 20,000 health and human services workers, including those who work as employment and youth counselors, social workers, corrections and probation officers, Child Line and 911 operators, drug and alcohol counselors, and court employees, among others. Approximately half of our members are employed by the Commonwealth, and the remainder work for municipal, county, and private employers across the state.*

*Our members are a diverse group of individuals, of varying ethnicities, political affiliations, and beliefs, but they are united by their dedication to serving our clients and the public at large – the people of Pennsylvania.*



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