

**Yes, I want to become a member of UPTE-CWA to secure fair pay increases and protect my benefits and other working conditions!**



You do not automatically become a member of UPTE-CWA when you are hired at UC. Please fill out this membership form to obtain full member benefits and support our efforts to improve our jobs at UC.

Please fill as much of this form as possible and sign below. Dues are the same for everyone and set uniformly by UPTE. Your dues may be tax deductible.

**CAMPUS**

- Berkeley     Santa Cruz     San Francisco     Davis     Santa Barbara     Merced
- LBNL     UCOP     Riverside     Irvine     Los Angeles     San Diego

NAME \_\_\_\_\_

EMPLOYEE NUMBER \_\_\_\_\_ JOB TITLE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

WORK PHONE \_\_\_\_\_ HOME PHONE \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

WORK LOCATION (BUILDING/ROOM/CAMPUS) \_\_\_\_\_

NAME OF PERSON WHO ASKED ME TO JOIN (if applicable) \_\_\_\_\_

EMAIL \_\_\_\_\_ CELL PHONE/TEXT \_\_\_\_\_  Please do not text me.

**MEMBERSHIP APPLICATION**

**Membership:** I apply to become a member of University Professional & Technical Employees, CWA Local 9119 (UPTE).

**Authorization:** I authorize and direct my employer to deduct from my pay the amount of membership dues certified by UPTE, as they may be adjusted periodically by UPTE, as well as any other deductions indicated below, and to remit this amount to UPTE. This authorization may be revoked only if I withdraw my membership during the 30 day window prior to the anniversary of my joining UPTE, in the manner specified in the collective bargaining agreement covering my position, if I am no longer in an UPTE represented collective bargaining unit or as otherwise permitted by law. Requests for membership revocation must be submitted in writing with signature and date to the UPTE headquarters and include the employer-issued identification number.

**UPTE's Political Action Fund (PAF):** Our political action fund. No UPTE dues money goes to support politicians, so this fund is how we can make sure legislators who support UC workers get elected.

Please select a monthly contribution.     \$20     \$15     \$10     \$5     more: \_\_\_\_\_

*(You can use this form for initial sign up or to increase your contribution.)*

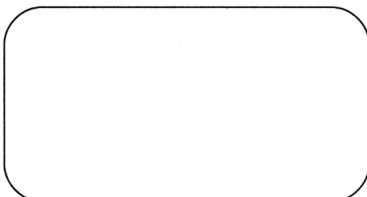
**UPTE's charity of choice is the Elizabeth Glaser Pediatric AIDS Foundation.**

Please consider making a monthly contribution of any amount.    \$

SIGNATURE

DATE

For university use only



TRAN CODE	EMPLOYEE ID NO.	DATE	ELEMENT NO.	BAL CD	AMOUNT
1	2 4	12 13	18 19	22	23 23 30
		MO DY YR			
X1		. .	6	G	. . . . .
X1		. .	6	G	. . . . .
X1		. .	6	G	. . . . .