



SERVICE EMPLOYEES INTERNATIONAL UNION LOCAL 517M APPLICATION FOR MEMBERSHIP EMPLOYER DEDUCTED GROUPS WITH COPE UPAY

I request and voluntarily accept membership in SEIU Local 517M and its successors or assigns (collectively "Local 517M"). I will receive the benefits and abide by the obligations of membership set forth in both Local 517M's and the Service Employees International Union's Constitutions and Bylaws. I authorize Local 517M to act as my representative in collective bargaining over wages, benefits, and other terms/conditions of employment with my employer, and as my exclusive representative where authorized by law. My membership will be continuous, unless I resign by providing notice to my Employer. I recognize that union membership is voluntary and not a condition of employment, and that I can decline to join without reprisal.

Name: _____ Hire Date: _____

Address: _____ Birthdate: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Personal E-Mail: _____

Cell Phone: _____ **I would like to receive text messages** I understand that SEIU, its local unions, and affiliates may use automated calling technologies and/or text message me on my cellular phone on a periodic basis. Local 517M and SEIU will never charge for text message alerts. Carrier message and data rates may apply to such alerts.

Employer: _____ Work Phone: _____

Worksite: _____ Please Select One: Part-Time Full-Time

Occupation: _____

Signature _____ Date: _____

DUES CHECK-OFF AUTHORIZATION

I request and voluntarily authorize my employer to deduct from my earnings and to pay to Local 517M and its successors and assigns (collectively "Local 517M") an amount on notice from the Union, such amounts including membership dues and special assessments, as may be established by the Union and become due to it from me during the effective period of this authorization.

Signature for Deduction of Dues: _____ Date: _____

I would like to contribute to the SEIU Committee on Political Education (COPE) and my payment information is included on the back of this form.

Yes! I want to become a COPE Contributor and do my part to make elected officials listen to working people.

Building—and maintaining—our political strength begins with you. If every SEIU 517M member contributes \$5 or \$10 per pay period to COPE, together as a union, we will have the money to support our vision of a better Michigan.

COPE funds are used to support pro-worker candidates on both sides of the aisle as well political work that benefits members. Dues money cannot be used for partisan political purposes but COPE lets us have a stronger voice in the political process. With your COPE dollars, we:

- Help elect pro-union political candidates, who have been steadfast in their opposition to paycheck deception legislation, pension cuts, privatization, and bills that weaken public employee collective bargaining;
- Mobilize members to advocate for issues critical to working families, such as fair federal and state public service funding, on-the-job worker protections and more;
- Educate political candidates and politicians about the issues that matter to public employees and working families;
- Hold elected anti-worker politicians accountable by educating members about their records and mobilizing them to take action, in their districts, at the Capitol, and at the ballot box!

I authorize SEIU 517M to deduct my COPE amounts I authorize in the months I work on the following schedule:

15th of each month OR 30th of each month

I would like to contribute to SEIU COPE in the monthly amount of: \$2 \$5 \$10 Other \$_____

Option A: Automatic deduction from bank account

Name on Account _____

Account Type Savings Checking

Routing Number (9 Digits) _____

Account Number _____

Option B: Automatic deduction from credit/debit card

Card Type: MasterCard Visa Discover Amex

Name on Card _____

Card Number _____

Expiration Date ____ / ____ Security Code _____

COPE Legal Compliance: 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.

Contributions or gifts to SEIU COPE are not deductible for federal income tax purposes.

My signature below shows that I have received and agree with the terms of this card.

Name (printed) : _____

Signature _____ Date _____