

MASSACHUSETTS & NORTHERN NEW ENGLAND LABORERS' DISTRICT COUNCIL
MASSACHUSETTS PUBLIC EMPLOYEES' COUNCIL
CHECK-OFF AUTHORIZATION CARD

Employees' Name

(Print) Last First Middle Initial

I hereby authorize and direct my Employer to deduct from my pay each pay period \$ _____ or monthly \$ _____ as regular dues of Local Union No. _____ of the Laborers' International Union of North America, AFL-CIO, and to remit such amounts to the Secretary-Treasurer of such Local Union for an on my behalf.

This authorization and assignment shall be irrevocable for the period of the existing agreement between my employer and said Local Union, or for one year, whichever is less, and shall automatically renew itself for successive agreement or annual periods, unless I give written notice of my desire to revoke same to the company and to said Local Union at least sixty (60) days, and not more than seventy-five (75) days before the periodic renewal dates of this authorization and assignment.

Social Security No. _____ Date _____


Signed



**MASSACHUSETTS & NORTHERN NEW ENGLAND
LABORERS' DISTRICT COUNCIL**
Laborers' International Union of North America, AFL-CIO
7 Laborers' Way, Hopkinton, Massachusetts 01748

APPLICATION FOR MEMBERSHIP

NAME _____ SOC SEC NO _____
ADDRESS _____ APT. NO _____
CITY _____ STATE _____ ZIP _____ BOOK NO. _____
Employed at _____ Dept/Job Title _____

I hereby accept membership in the Massachusetts & Northern New England Laborers' District Council of the Laborers' International Union of North America AFL-CIO, or any local union assigned by them, and designate the Massachusetts & Northern New England District Council to act for me as collective bargaining agent in all matters pertaining to conditions of employment. I hereby pledge to abide by the Constitution and By-Laws of the Massachusetts & Northern New England Laborers' District Council of the International Union of North America AFL-CIO. 

SIGNED _____ DATE _____
DATE OF BIRTH _____
BENEFICIARY _____