## **FOSCEP Members are ALL IN!** Building POWER for our Union and our Members!

I stand with my union. I want a strong voice at work. As a member of the Federation of State Cultural & Education Professionals, Local 2382, I am part of a larger network that includes state employees, educators and support staff working together to build POWER for our union and each other. We stand for:



Professional growth & expertise Organizing with our students, parents & community Workers' rights and labor solidarity Excellence, equity, inclusion and social justice Respect for our professions and all working people

## **FOSCEP Local 2382 Membership Application**

PLEASE	PRINT	LEGIBLY
--------	-------	---------

LAST NAME	FIRST NAME		
HOME ADDRESS	CITY	STATE	ZIP
EMPLOYEE NUMBER	FINAL 4 DIGITS EMPLOYEE SSN		
PERSONAL EMAIL ADDRESS		CELL PHONE	

\_\_\_\_ I want to receive occasional text messages from my union. There is no charge by the union to receive text messages but standard data and text rates from your mobile carrier may apply. You may opt out anytime.

Your Facebook Page

Your Twitter Handle @

## Federation of State Cultural and Education Professionals Membership Application and Dues Authorization

**MEMBERSHIP ENROLLMENT:** I want to join with my fellow employees and become a member of the Federation of State Cultural and Education Professionals, Local 2382. I hereby request and voluntarily accept membership in FOSCEP Local 2382 and I agree to abide by its Constitution and Bylaws. I authorize FOSCEP Local 2382 to act as my exclusive representative in collective bargaining over wages, benefits and other conditions of employment.

## Signature

Date

**DUES PAYMENT AND DEDUCTION AUTHORIZATION:** I hereby request and voluntarily authorize my employer to deduct from my earnings and to pay over to the Federation of State Cultural and Education Professionals, Local 2382, an amount equal to the regular monthly dues uniformly applicable to members of my union. This authorization shall remain in effect and shall be irrevocable unless I revoke it by sending written notice via the U.S. Mail to Local 2382 and the employer during the period not less than thirty (30) days and not more than forty-five (45) days before the annual anniversary date of this agreement. This authorization shall be automatically renewed as an irrevocable check-off from year to year unless I revoke it during the window period, even if I have resigned my union membership.

Signature