

Please fill out and mail to:
2580 Drew Rd., Suite 203,
Mississauga, Ontario L4T 3M5

All information is confidential



**INTERNATIONAL ASSOCIATION of MACHINISTS
and AEROSPACE WORKERS**

PLEASE PRINT

Name _____ **Telephone** _____

Address _____

Company _____ **Department** _____

I hereby request and accept membership in the International Association of Machinists and Aerospace Workers and hereby authorize its representatives to bargain for me in all matters pertaining to my employment.

Signature of Applicant

Mth. _____ **Day** _____ **Yr.** _____

Date of Application

Signature of Collector

