

CBTU ONTARIO CANADA CHAPTER MEMBERSHIP FORM

				Applicant Information		
Full N	ame:					
		First		M.I.	Last	
Addre	ess:					
		Street Address			Apartment/Unit #	
		City		Province	Postal Code	
Prima	ry Phone:	()		Year of Birth:	_	
Unior	n Affiliation:					
E-mai	l Address to					
Recei	ve CBTU Info:					
		(This e-mail addres	s will no	t be shared outside of CBTU)		
			Į	Jnion Membership Status		
		• •	check	one box that corresponds to yo	ur union membership status, and make your	
chequ	ie or money orde	er payable to: Coal	ition of	f Black Trade Unionists.		
	☐ International Officer: \$155.00			Rank and File: \$35.00	$^\square$ *Information Only: \$25.00	
					(*This level of membership entitles you to	
	C+-ft, ¢00.00			Dating as 620 00	participate in meetings, but not to any voting	
	Staff: \$80.00			Retiree: \$20.00	or delegate privileges)	
				Processing Information		
Please Check One:				Please Mail To:		
	I would like to join CBTU			Coalition of Black Trade Unionists		
		•		Ontario Canada Chapter		
☐ I am renewing my membership			c/o Yolanda McClean			
	Please note my	y change of addres	is	1482 Bathurst Street, Suite 200 Toronto, ON M5P3H1		

A MEMBERSHIP CYCLE IS FROM JANUARY 1 - DECEMBER 31 OF EACH YEAR