



**INTERNATIONAL BROTHERHOOD  
OF ELECTRICAL WORKERS**  
Local # 529

Authorization For Representation

I Hereby authorize Local Union No. 529 of THE INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS, to represent me in collective bargaining with my employer.

Print Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City/Town \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Classification \_\_\_\_\_

Employer \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

Signature \_\_\_\_\_