



CUPE Local 2262 Member Profile Form

#9 1250 26th Street, Castlegar, British Columbia V1N 4C9, Canada

Return to an Executive Team member or 2262cupe@gmail.com

** Confidential – For CUPE Local 2262 Use Only*

SECTION 1: MEMBER INFORMATION

Full Name: _____

Preferred Name (if different): _____

Pronouns: ☐ He/Him ☐ She/Her ☐ They/Them ☐ Other: _____

Home Address: _____

City: _____ Postal Code: _____

Phone (Primary): _____ Phone (Secondary): _____

Email: _____

Date of Birth (MM/DD/YYYY): _____

Emergency Contact Name: _____

Relationship: _____ Emergency Contact Phone: _____

SECTION 2: EMPLOYMENT DETAILS

Employer: _____

Department: _____

Job Title: _____

Employee Number (if applicable): _____

Worksite Location: _____

Work Phone: _____

Work Email: _____

Employment Status:

☐ Full-Time ☐ Part-Time ☐ Casual ☐ Temporary

Union Steward (if known): _____

SECTION 3: UNION ENGAGEMENT

- ☐ I am interested in receiving updates from CUPE Local 2262
- ☐ I am interested in becoming more involved with the union (e.g., committees, steward roles, events)
- ☐ I am interested in attending union education or training

Skills, experience, or interests that may benefit CUPE Local 2262:

SECTION 4: ACCESSIBILITY & SPECIAL REQUIREMENTS

Do you have any accessibility requirements? ☐ Yes ☐ No

If yes, please describe: _____

Dietary Restrictions or Allergies:

- ☐ None
- ☐ Vegetarian ☐ Vegan ☐ Gluten-Free ☐ Other: _____

T-Shirt Size: ☐ XS ☐ S ☐ M ☐ L ☐ XL ☐ XXL ☐ Other: _____

SECTION 5: CONSENT & PRIVACY

- ☐ I consent to CUPE Local 2262 using my contact information for union-related communications.
- ☐ I understand my information will be kept confidential and used only for union-related purposes.

Member Signature: _____ Date: _____

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For CUPE Local 2262 Use Only:

☐ Verified by CUPE Representative

Received By: _____ Date: _____