

UE Local 170  
WEST VIRGINIA  
PUBLIC WORKERS  
UNION  
(WVPWU)



UE Local 170  
West Virginia Public Workers Union

**Our Program**

- Annual Pay Increases
- A Real Voice on the Job
- Dignity for Public Employees
- Stop Privatization

APPLICATION FOR MEMBERSHIP AND PAYROLL DEDUCTION AUTHORIZATION

Name (Please Print) \_\_\_\_\_  
Street Address \_\_\_\_\_ Home Phone \_\_\_\_\_  
City \_\_\_\_\_ Zip \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Employing Department \_\_\_\_\_ Division \_\_\_\_\_  
Work Location \_\_\_\_\_ Shift \_\_\_\_\_ County \_\_\_\_\_  
Home Email Address \_\_\_\_\_

I hereby apply for membership in UE Local 170-West Virginia Public Workers Union (WVPWU) and I authorize the State Auditor to deduct from my monthly salary, and remit to UE Local 170-West Virginia Public Workers Union membership dues in the amount certified by UE Local 170 provided that I may revoke such deduction authorization thirty days prior to the date on which the deduction is regularly made.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

UE Local 170 • 1591 Washington St. E. • Charleston, West Virginia 25311 • 304.699.4401 • www.uelocal170.org

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WEST VIRGINIA  
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Work Location \_\_\_\_\_ Shift \_\_\_\_\_ County \_\_\_\_\_  
Home Email Address \_\_\_\_\_

I hereby apply for membership in UE Local 170-West Virginia Public Workers Union (WVPWU) and I authorize the State Auditor to deduct from my monthly salary, and remit to UE Local 170-West Virginia Public Workers Union membership dues in the amount certified by UE Local 170 provided that I may revoke such deduction authorization thirty days prior to the date on which the deduction is regularly made.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

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