Submit your forms at your New Employee Orientation Day 1

**\*All sections are required.**

| **\*Name:** | **\*Address(include city, state and zip)** |
| --- | --- |
| **\*Date of Hire:** | **\*Date of Birth:** |
| **\*Employee ID number:** | **\*Social Security Number(this is required to process your membership file)** |
| **\*Personal Email Address:** | **\*Cell Phone: (This will be used to text updates/reminders. If you do not want to be contacted via phone, leave blank)** |
| **Are you interested in joining one of our committees?**  **(Communication committee, negotiation committee, bulletin board committee, ECT)**  **YES NO MAYBE/NEED MORE INFO** | **Do you authorize Local 1170 to text you at the number provided for updates regarding the union and monthly reminder meetings?**  **YES NO EMAIL ONLY** |

**You must choose to either JOIN or DECLINE membership in the Union. If you do not decline membership within 30 days of hire, you will automatically become a member of the Union and MUST pay monthly dues (Article 3.1 of the Collective Bargaining Agreement).**

Payment of dues is by payroll deduction at a rate of twenty-five dollars ($25.00) per pay period equating to $50 per month.



I **ACCEPT** membership and authorize Pacific Medical Centers to withhold, via payroll deduction, union dues and forward such payment to the American Federation of Government Employees (AFGE), Local 1170, Pacific Medical Centers, Seattle, WA 98144.

I **DECLINE** membership to the American Federation of Government Employees (AFGE), Local 1170, Pacific Medical Centers, Seattle, WA 98144.

**Employee Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature and Title of Authorized Official:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What to do with this form:

1. You are required to submit your enrollment form at Day 1 of New employee orientation and forms will be collected.
2. You will have 30 days from your hire date to decline membership enrollment.
   1. Starting at Day 31, the process of payroll deduction and AFGE enrollment will be initiated.
   2. You can email us to decline your enrollment at [NEO@afgelocal1170.org](mailto:NEO@afgelocal1170.org) no later than 7pm on the 30th day of your hire date.

NEO facilitator: Please obtain all enrollment forms on Day 1 of New Employee Orientation and send to: NEO@afgelocal1170.org.