



Application for Membership in a Local Union

of the International Alliance of Theatrical Stage Employees, Moving Picture Technicians, Artists and Allied Crafts of the United States, its Territories and Canada

I hereby make application for membership in Local No. _____ of the International Alliance of Theatrical Stage Employees, Moving Picture Technicians, Artists and Allied Crafts of the United States, its Territories and Canada ("the Union"). I base my application for membership on the following facts, which I affirm to be true:

I, _____, was born on _____ and presently
(Print or Type Name) (Month) (Day) (Year)

reside at _____
(Street) (City) (State/Province) (Zip/Postal Code)

Home Phone _____ Cell Phone _____

Email Address _____ Do you have a Twitter account? ____ Yes ____ No

My Social Security/Insurance Number is _____.

I am by occupation a _____ and have worked at the following employers in the
entertainment industry: _____

Presently employed by _____ as a _____
(Specify Occupation)

Previously applied for membership in a Local Union or Department of the I.A.T.S.E.? _____, to Local No. _____

Was Application rejected? _____. This application is for Journeyman ____ or Apprentice ____? (check one)

PLEDGE

I, the undersigned, as a condition of my membership in the International Alliance of Theatrical Stage Employees, Moving Picture Technicians, Artists and Allied Crafts of the United States, its Territories and Canada, do solemnly pledge myself to accept and abide by the provisions of the I.A.T.S.E. Constitution and Bylaws, as now in force and hereafter legally amended, hereby express my consent to be governed thereby in the conduct of my trade and in my relationship with the Union.

Signature of Applicant _____ Date _____, 20____

Initiation Fee _____ Amount Paid _____

(LOCAL SEAL HERE)

This application submitted by Local No. _____

Secretary _____

This is to certify that _____ has on this _____ day of _____, 20____,
been admitted to membership in Local No. _____ having fully complied with the requirements as set forth in
the Constitution and Bylaws of the Local Union and the International Alliance of Theatrical Stage Employees, Moving
Picture Technicians, Artists and Allied Crafts of the United States, its Territories and Canada.

Member's Social Security/Insurance Number _____

(LOCAL SEAL HERE)

_____, President

_____, Secretary

THIS STUB TO BE COMPLETED AND RETURNED TO THE GENERAL OFFICE IMMEDIATELY FOLLOWING APPLICANT'S ADMISSION TO MEMBERSHIP.

THIS APPLICATION MUST BE ACTED UPON WITHIN SIX MONTHS OTHERWISE A NEW APPLICATION MUST BE SUBMITTED.

THIS APPLICATION MUST BE ACCOMPANIED BY THE \$100.00 PROCESSING FEE OR \$10.00 PROCESSING FEE FOR SPECIAL DEPARTMENT LOCAL UNIONS.



**International Alliance of Theatrical Stage Employees,
Moving Picture Technicians, Artists and Allied Crafts**

MOTION PICTURE STUDIO MECHANICS LOCAL 477

Personal Information

Name (first, middle, last)

Street Address

Apartment #

City

State

Zip Code

Email address

Cell or mobile phone

Other phone

Date of Birth

Marital Status: Single Married

Emergency Contact: _____

Name / Relationship

Phone

Job Classification 1. _____ *

Job Classification 2. _____ *

* Job classifications will be reviewed for level of expertise by the Local 477 Executive Board.

Other I.A.T.S.E. memberships: _____

Local number, type, and city

Are you applying as a Film
School Graduate?

Name of college, university, or technical school / Date of graduation



**International Alliance of Theatrical Stage Employees,
Moving Picture Technicians, Artists and Allied Crafts**

MOTION PICTURE STUDIO MECHANICS LOCAL 477

4101 Ravenswood Road, Suite 108-109, Fort Lauderdale, Florida 33312

**Authorization for Representation and
Designation of Collective Bargaining Representative**

Print Full Name

Address

Email address: _____

Telephone: _____

Classification 1. _____

Classification 2. _____

I hereby authorize the International Alliance of Theatrical Stage Employees, Moving Picture Technicians, Artists and Allied Crafts of the United States, its Territories, and Canada, AFL-CIO, CLC, and I.A.T.S.E. Local Number 477, to represent me for the purpose of collective bargaining with all employers for whom I may become employed after the date set forth below on all present and future productions, and to negotiate and conclude all agreements respecting wages, hours, and other terms and conditions of employment without election. I understand that this authorization shall not expire until such time as I revoke it in writing.

I hereby also apply for membership in the above-named Union.

Signed: _____ Date: _____

Social Security Number: _____ - _____ - _____



**International Alliance of Theatrical Stage Employees,
Moving Picture Technicians, Artists and Allied Crafts**

MOTION PICTURE STUDIO MECHANICS LOCAL 477

4101 Ravenswood Road, Suite 108-109, Fort Lauderdale, Florida 33312

AUTHORIZATION FOR DUES CHECK OFF

Effective date of hire, I authorize and assign to Motion Picture Studio Mechanics I.A.T.S.E. Local 477 three percent (3%) of all wages to be earned by myself in the jurisdiction of Local 477 as an employee, and direct my employer to deduct said three percent (3%) from my wages and remit to Local 477.

This assignment shall be irrevocable for a period until termination of the applicable collective bargaining agreement.

Employee Name:

Social Security No. _____

Department: _____

Signature:

Date: _____