

MARYLAND STATE & DISTRICT OF COLUMBIA  
AMERICAN POSTAL WORKERS UNION, AFL-CIO  
MEMBER'S REGISTRATION FORM

INTERPRETER SERVICE     **NOTE: NO CHILD CARE SERVICES PROVIDED**

LOCAL.....  
MEMBER'S NAME.....  
MEMBER'S CONTACT.....  
CRAFT.....

LOCAL PRESIDENT (sign).....  
LOCAL SECRETARY (sign).....  
DATE \_\_\_\_\_

\_\_\_\_\_  
(sign at seminar)

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LOCAL.....  
MEMBER'S NAME.....  
MEMBER'S ADDRESS.....  
CRAFT.....[ ] DELEGATE ( ) ALTERNATE

LOCAL PRESIDENT (sign).....  
LOCAL SECRETARY (sign).....  
DATE \_\_\_\_\_

MEMBER'S SIGNATURE \_\_\_\_\_

\_\_\_\_\_  
(Sign at Conference)