

**CHICAGO NEWSPAPER GUILD LOCAL NO. 30471**  
*Communications Workers of America, AFL-CIO*

PLEASE PRINT THIS FORM AND SEND IT WITH YOUR CHECK TO:

***Chicago Newspaper Guild, 222 N. La Salle Street, Chicago, IL 60601 Attention: Ed Dunphy***

Individual Membership dues: \$100 per year.

**MEMBERSHIP APPLICATION**

I designate the Chicago Newspaper Guild/CWA as my collective bargaining representative.

Print Name: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_/\_\_/\_\_\_\_ Ethnic Group: \_\_\_\_\_ Gender: \_\_M \_\_F

Social Security No. \_\_-\_\_-\_\_\_\_ Employed by: \_\_\_\_\_

Department: \_\_\_\_\_ Job Title: \_\_\_\_\_ Gross Weekly Salary: \$ \_\_\_\_\_

Date of Hire: \_\_/\_\_/\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\* OPTIONAL INFORMATION \*\*\*\*\*

Please list all previous experience in the media, interpreting or union work, giving, city, employer, job title and dates:

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Please check those guild activities in which you would most like to participate:

<input type="checkbox"/> Contract Negotiations	<input type="checkbox"/> Inter-Union Relations	<input type="checkbox"/> Human Rights
<input type="checkbox"/> Contract Enforcement	<input type="checkbox"/> Education	<input type="checkbox"/> Legislation
<input type="checkbox"/> Organizing	<input type="checkbox"/> Publications	<input type="checkbox"/> Social Affairs, Awards

Have you been a member of the Newspaper Guild or any of its locals at any time before this application? If so, give details:

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