

AUTHORIZATION FOR REPRESENTATION
Glass, Molders, Pottery, Plastics & Allied Workers International Union
(AFL-CIO-CLC)

I authorize the GLASS, MOLDERS, POTTERY, PLASTICS & ALLIED WORKERS INTERNATIONAL UNION, AFL-CIO-CLC to represent me for purposes of bargaining collectively with my employer for wages, hours, terms and conditions of employment.

Name _____
(Please Print)

Address _____

City, State, Zip Code _____

Employed By _____

Job Held _____ Shift _____

Phone _____ Date _____

Signature _____
(Do Not Print)

