



TUGSA MEMBERSHIP CARD

Temple University Graduate Students' Association (TUGSA)
American Federation of Teachers, Local #6290
215-235-0512 union@tugsa.org



Yes! I support my colleagues in our efforts to build a strong union. I hereby become a member of the Temple University Graduate Students' Association, and I authorize TUGSA to be my exclusive representative for the purposes of collective bargaining with Temple University.

Name: _____
Address: _____ City, State, ZIP: _____
Email: _____ Home Phone: _____ Campus Phone: _____
Dept. Enrolled: _____ Dept. Employed: _____

TA RA GA TG FFF PT instructor
 No university funding Other, please specify: _____

Signature: _____ Date: _____

TUGSA runs on volunteer power. As part of my commitment, TUGSA can count on me to contribute 1-2 hours of my time to our union:

weekly bi-weekly monthly

TUGSA DUES AUTHORIZATION FORM

To: Temple University
Human Resources Office
Labor Relations

I, the undersigned, a member of TUGSA, authorize Temple to deduct all dues payments authorized by the TUGSA Constitution and Bylaws from my pay and to remit the amount so deducted to TUGSA, while I am employed in a bargaining unit position.

This authorization will remain in full force and effect until revoked by me, in writing. Such revocation must be a written notice sent to TUGSA and the Temple Labor Relations Office during the ten (10) business days preceding the expiration of a semester.

As of June 1, 2004, the TUGSA Bylaws set dues at 1.65% of income from employment within the bargaining unit. Dues levels are established by the membership and are subject to change according to procedures defined in Article Thirteen of the TUGSA Constitution. Copies of the TUGSA Constitution and Bylaws are available at the TUGSA office or online at www.tugsa.org.

Name (please print): _____

Department Employed (please print): _____

Social Security #: _____

Signature: _____ Date: _____

