



ASSOCIATE MEMBER APPLICATION

I, _____, request membership in the ATU Latino Caucus as an associate member. My only involvement with the organization will be of moral support and visibility. I understand I will have no voice and no vote in any of the business of the ATU Latino Caucus.

I pledge to abide by the International Bylaws and the Declaration of Principles of the Latino Caucus, and to cooperate with the Latino Caucus Officers in implementing the goals and objectives of the organization.

Name (please print)

Date

Mailing Address

City

State

Zip

Phone #

Signature

E-Mail

*Note:
ANNUAL DUES \$30.00*

SEND TO:
David Benavides
Treasurer
161 Tommins
San Antonio, TX 78214

MAKE CHECK PAYABLE TO:
ATU LATINO CAUCUS