

# The Communications Workers of America

## American Airlines Payroll Deduction Authorization



### Select One Option Below

\_\_\_\_\_ I hereby request and accept membership in the Communications Workers of America, and authorize American Airlines to deduct from my salary an amount equal to regular monthly Union dues. This authorization shall remain in effect unless I cancel in writing.

\_\_\_\_\_ I do not wish to become a member of the Communications Workers of America. I do authorize American Airlines to deduct from my salary an amount equal to regular monthly Union dues. This authorization shall remain in effect unless I cancel in writing.

### **\*Indicates mandatory field**

\*Name (print): \_\_\_\_\_ \*Date of Hire: \_\_\_\_\_

\*Work Location: \_\_\_\_\_ \*American Airlines Employee #: \_\_\_\_\_

\*Home Address: \_\_\_\_\_ \*Apt #: \_\_\_\_\_

\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Ok to Text: \_\_\_\_\_ Yes \_\_\_\_\_ No

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