I.C.O.P.S. APPLICATION FOR MEMBERSHIP AND DUES DEDUCTION AUTHORIZATION



I hereby voluntarily apply for membership in the **Illinois Council of Police** and authorize said Union to represent me as my exclusive collective bargaining representative to negotiate on my behalf all terms and conditions of employment, either into agreements on my behalf and to otherwise represent me in any and all claims and matters arising out of my employment. I hereby agree to be bound by the Constitution and By-Laws of the **Illinois Council of Police** and by any collective bargaining agreements negotiated by the Union with my Employer.

I authorize and direct my Employer_____
to deduct from my wages each pay period as provided by the Agreement between the Union and said Employer
the monthly dues which may be charged by the Union in order to maintain my membership in good standing.

This authorization shall continue for the term of this contract, any extension thereof, and any successive collective bargaining agreements, unless revoked, though the dues may change from time to time. This authorization may only be revoked through written notice to the Union sent via certified mail during the ten (10) calendar day period commencing one year after the date on this card and during the same period each successive year.

Print Name_			Job Title			
Signature		Typed na signature	Typed name constitutes signature pursuant to ECSA. Date			
Address						
	Street	City		State	Zip	
Email		Date of Bir	th		_	
elephone_	Cell					
	White-Union conv	Yellow-Payroll copy	Pink-Meml	ner conv		