



# Bermuda Industrial Union

## MEMBERSHIP APPLICATION FORM

Last Name	Joining Date	Rejoining Date
<input type="text"/>	<input type="text"/>	<input type="text"/>

Other Names (In Full)

Last Name Before Marriage

Social Security #

Male  Female

Date of Birth     
Month Day Year

Home  Cell  e-mail

Telephone

Address

Postal Code

Present Employer

Previous Employer  Bermuda Status  Yes  No

No. of Dependents  Is Spouse a BIU Member?  Yes  No

Country of Birth  Country of Citizenship

Marital Status  Married  Single  Divorced  Widowed

Occupation

Length of Employment (Present)

Previous Employment

**We ask that you fill in this information above and be as accurate as possible.**  
**THESE FORMS WILL BE HANDLED IN STRICT CONFIDENCE**  
*There is a \$3.00 Joining Fee and \$14.00 weekly dues*