



# 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) <input type="text"/>			
Last Name Before Marriage <input type="text"/>			
Social Security #	<input type="text"/>		Address <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Postal Code <input type="text"/>
Male	<input type="checkbox"/>	Female <input type="checkbox"/>	
Date of Birth	<input type="text"/>	<input type="text"/>	
Home	Cell	e-mail	
Telephone	<input type="text"/>	<input type="text"/>	
Present Employer <input type="text"/>			
Previous Employer	<input type="text"/>	Bermuda Status	Yes <input type="checkbox"/> No <input type="checkbox"/>
No. of Dependents	<input type="text"/>	Is Spouse a BIU Member?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Country of Birth	Country of Citizenship		
<input type="text"/>	<input type="text"/>		
Marital Status	Married <input type="checkbox"/>	Single <input type="checkbox"/>	Divorced <input type="checkbox"/> Widowed <input type="checkbox"/>
Occupation	<input type="text"/>		
Length of Employment (Present)	<input type="text"/>		
Previous Employment	<input type="text"/>		

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*