



**Membership Agreement Form Please print clearly and fax
back to Jade West at 202-296-5940**

Yes. We will join the Coalition for a Democratic Workplace as a Steering Committee Member.* Please invoice us.

Yes. We will join the Coalition for a Democratic Workplace as a General Member.*

Please check here if you are willing to be placed on the Coalition's membership list and identified with CDW's public advertisements and statements.

Name :

Organization : Address :

City : State : Zip : Email :

Signature :

Are you willing to talk to the press about card-check? Yes or No? Print or TV?

Are you willing to testify at Congressional hearings? Yes or No **Are you willing to actively lobby on this issue?** Yes or No **Are you willing to help organize at the state level?** Yes or No

If "Yes," do you have state and/or local affiliates: Yes or No

For associations only: How many members do you have? _____

How many individual employees are included in your membership? _____

For more information contact Jade West at 202-872-0885 or jwest@nawd.org.