

I WANT TO BE INFORMED!

Name _____

Address _____

City _____ State _____ ZIP _____

Cell Phone _____

E-mail Address _____

Local _____ Shirt Size _____

By signing below, I consent to be contacted via telephone, e-mail, cell phone or text messages by the Chicago Regional Council of Carpenters or by my Local Union, including by auto-dialed or pre-recorded calls.

I agree that this authorization is in effect until I provide written revocation to;

CRCC, 12 East Erie, Chicago, IL. 60611

Print Name _____

Signature _____

Date _____

Please mail this form to:

CARPENTERS LOCAL UNION 1889
4979 Indiana Avenue • Suite 202
Lisle, Illinois 60532