APPLICATION FOR AUPE AFFILIATE MEMBERSHIP

Affiliate members consist of those persons who were formerly AUPE members and pay a one-time fee of \$25.00 CAD.

Name of Applicant:
AUPE Membership Number: Former Local/Chapter:
Mailing Address:
Phone Number: Email:
I agree to pay and have enclosed the one-time fee of \$25.00 CAD.
I understand the only benefit to an Affiliate Membership is to be able to access the benefits of the AUPE Discount Program.
I understand that if approved, I will be sent an acceptance letter and an AUPE Affiliate Membership Card.
Applicant Signature: Date:
FOR OFFICE USE ONLY
Date received in AUPE Executive office:
Approved
Yes No
Please allow 6-8 weeks to process your application.

Submit the complete application form

along with the one-time fee to:

AUPE Executive Office 10025 - 182 ST NW, Edmonton, AB T5S 0P7 T: 1-800-232-7284 F: 780-930-3392 E: info@aupe.org

AUPE