AUTHORIZATION TO DEDUCT DUES
INTERNATIONAL UNION OF POLICE ASSOCIATIONS, AFL-CIO

TO/EMPLOYER:	Broward County Sheriff's Office – L. 6020

I hereby assign to the International Union of Police Associations, AFL-CIO, from any wages earned or to be earned by me as your employee, my periodic dues in such amounts as are now or hereafter established by the International Union of Police Associations, AFL-CIO. I authorize and direct you to deduct and withhold such amounts from my salary and to remit the same to said International Union of Police Associations, AFL-CIO. I hereby waive all rights and claims to said monies deducted and transmitted in accordance with this authorization, and release my employer and all its officers from any liability therefore.

This assignment, authorization and direction shall be revocable any time upon thirty (30) days prior written notification to my employer and the International Union of Police Associations, AFL-CIO.

Name of Employee (Print): _____

Signature of Employee: _____

Employee Number: _____

Date Signed: _____ **(BSP 6020)**

MEMBERSHIP APPLICATION
Broward County Sheriff's Office – L. 6020

I, the undersigned, do hereby apply for membership in the International Union of Police Associations, AFL-CIO. The I.U.P.A. reserves the right to decline membership requests based upon any non-discriminatory criteria.

Name of Employee (Print): _____

Signature of Employee: _____

Position: _____

Date Signed: _____

Address: _____

City, State, Zip: _____

Contact Phone Number: _____

Personal Email: _____ **(BSP 6020)**

Email Application to: membership@6020.iupa.org, membership@iupa.org & Salarymaintenance@sheriff.org

The application must be reviewed for approval by an Executive Board Member from the Local

Approved by: _____ Date: _____

Title: _____