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INTERNATIONAL ALLIANCE OF THEATRICAL STAGE EMPLOYEES  
AND MOVING PICTURE MACHINE TECHNICIANS,  
ARTISTS AND ALLIED CRAFTS  
OF THE UNITED STATES AND CANADA

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Local No. 115  
www.iatse-115.com  
PO Box 462, Jacksonville, FL 32201-0462  
Office phone (904) 399-5201 fax (904) 399-5248

CHECK-OFF AUTHORIZATION

DATE: \_\_\_\_\_, 20 \_\_\_\_\_

To: \_\_\_\_\_  
(Name of Employer)

Effective immediately, you are hereby authorized and directed to deduct an initiation fee from my wages or salary as required by the Jacksonville Stage Employees Local No. 115, Jacksonville, Tallahassee and Gainesville, Florida ("Local 115"), as a condition of membership and in addition thereto, to make payroll deductions in the amount of five and one half percent (5.5%) of my gross wages or salary as work dues; and to remit all such deductions so made to Local 115. This authorization shall be irrevocable for a period of one (1) year or until the termination date of the collective bargaining agreement, whichever is sooner, and shall, however renew itself from year to year thereafter unless within thirty (30) days prior to the end of any yearly period I provide written notice of revocation to the employer and the union.

In signing this check-off authorization, I do so voluntarily, knowing that it is not a condition of employment.

Social Security Number: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_