

Name \_\_\_\_\_ **### - ## -**  
Please Print (Last) (First) (MI) (SSN)

Company/Employer \_\_\_\_\_ Date \_\_\_\_\_

Effective immediately the undersigned assigns to Local **414** of the International Alliance of Theatrical Stage Employees the sum of **1** % of all wages earned in IATSE covered employment, and authorizes and directs his/her employer to deduct such sum from his/her wages and to remit the same to said union as union dues. This assignment shall be irrevocable for a period of either one year or until termination of the applicable collective bargaining agreement, whichever is sooner, and shall be automatically renewed, with the same irrevocability, for successive like periods, unless terminated by the undersigned in writing not more than twenty (20) nor less than ten (10) days prior to the expiration of such period.

\_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_  
Address \_\_\_\_\_

Name \_\_\_\_\_ **### - ## -**  
Please Print (Last) (First) (MI) (SSN)

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