

Please fill and type your information into the boxes. You can take a screen shot or print the completed form and e-mail it back to us at [info@cmawlocal99.ca](mailto:info@cmawlocal99.ca)



## MEMBER INFORMATION UPDATE

Date of Birth: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Trade: \_\_\_\_\_

Journeyman:  Ticketed Journeyman     Non-Ticketed Journeyman

Apprentice:  1<sup>st</sup> yr.     2<sup>nd</sup> yr.     3<sup>rd</sup> yr.     4<sup>th</sup> yr.

**If at any point you are looking for work, please call the office at (403) 879-2635 to update your status so we can be on the lookout for you.**