

Union Membership Resignation Form

Instructions: Please fill out this form to formally resign your membership from the union and to revoke your union dues deduction authorization. Once completed, print, sign, and deliver this form to your union local representative and a copy to your employer's payroll department.

1. Member Information

Full Name:

Street Address:

City, State, Zip Code:

Phone Number:

Email Address:

2. Employment & Union Details

Employer / Company Name:

Job Title / Position:

Union Name:

Union Local Number (if known):

Employee ID / Union Member ID:

3. Statement of Resignation

Effective immediately, I hereby resign my membership in the above-named union and all of its affiliated bodies.

Furthermore, I hereby revoke any authorization I may have previously signed allowing the deduction of union dues, fees, or assessments from my wages. I request that my employer immediately cease deducting any such union dues or fees from my paychecks, in accordance with applicable state and federal laws.

4. Authorization and Signature

By signing below, I acknowledge my formal resignation from union membership and the revocation of my dues check-off authorization.

Member Signature (Sign after printing):

Date: