



Leeds and Grenville Labour Council
P.O. Box 115, Brockville, ON K6V 5T7
Email: LeedsAndGrenvilleLabourCouncil@gmail.com

Name of Union: _____ Local: _____

Address: _____

President: _____ Phone _____

Email _____ Cell _____

Treasurer: _____ Phone _____

Email _____ Cell _____

Mailing Address: _____

DELEGATE ENTITLEMENT:

1 to 50 members up to 2 delegates	151 to 200 members up to 5 delegates	And, for each additional 500 members, affiliated unions are entitled to one (1) more delegate.
51 to 100 members up to 3 delegates	201 to 250 members up to 6 delegates	
101 to 150 members up to 4 delegates	251 to 500 members up to 7 delegates	

No. of Members affiliated: _____ X \$.30/month = _____/month or Annual Payment = _____

On behalf of _____, we hereby commit our interest in affiliating to the Leeds and Grenville Labour Council.

Date: _____ Authorized Signature: _____

1. Delegate name: _____ Phone: _____

Email: _____ Cell: _____

2. Delegate name: _____ Phone: _____

Email: _____ Cell: _____

3. Delegate name: _____ Phone: _____

Email: _____ Cell: _____

4. Delegate name: _____ Phone: _____

Email: _____ Cell: _____

5. Delegate name: _____ Phone: _____

Email: _____ Cell: _____

6. Delegate name: _____ Phone: _____

Email: _____ Cell: _____

7. Delegate name: _____ Phone: _____

Email: _____ Cell: _____

Please keep your local Labour Council advised of any changes to the delegate information.