

Delegate's Pledge

“I, _____, do hereby accept

STATE YOUR NAME

the position of Delegate and member of the (Health Systems,

STATE YOUR DIVISION

Nursing Home, Pharmacy and Human Services, RN, Home
Care) Delegate Assembly. I pledge to faithfully carry out the

obligations of my office and secure for the members I
represent every right and privilege of Union Membership. I

pledge to help build our Union and defend it from all its
enemies. On this pledge, I stake my good name, my honor
and my conscience.”

CONSTITUTION

ARTICLE IV

SECTION 7: h

