



CREDENTIALIAL FORM

15 Gervais Drive
Suite 407
Toronto, ON
M3C 1Y8
www.labourcouncil.ca

ARTICLE IV: Representation

“Each Local Union, Branch or Lodge is entitled to one delegate for one hundred members or less. And one additional delegate for each additional two hundred members or major fraction thereof.”

1-200 members	1 delegate	601-800 members	4 delegates
201-400 members	2 delegates	801-1000 members	5 delegates
401-600 members	3 delegates		1 delegate for every 200 additional members

ARTICLE V: Sect.1. Membership fees.

Per capita is paid on the entire membership of the affiliate who work in Toronto and York Region as follows:

- Effective January 1, 2020, the per capita tax shall be fifty-two cents (\$0.52) per member per month
- Effective January 1, 2021, the per capita tax shall be fifty-three cents (\$0.53) per member per month
- Effective January 1, 2022, the per capita tax shall be fifty-four cents (\$0.54) per member per month

This is to certify that the person(s) listed on page 2 of this form is/are the delegate(s) from:

Union _____ Local _____

Union Web Site _____

President _____ Phone — Home _____

Address _____ Work _____

(City) (Postal Code) Fax _____

Email _____ Signature _____

Recording Secretary _____ Phone — Home _____

Address _____ Work _____

(City) (Postal Code) Fax _____

Email _____ Signature _____

Treasurer/Fin. Secretary _____ Phone — Home _____

Address _____ Work _____

(City) (Postal Code) Fax _____

Email _____ Signature _____

**If officers are delegates, please include them on page 2.
At least two officers’ signatures must appear above in order for the credential form to be valid.**

UNION _____

LOCAL _____

DELEGATES (Please Print)

Name _____ Home Address _____

Phone Home _____ City _____ Postal Code _____

Work _____ Email _____

Name _____ Home Address _____

Phone Home _____ City _____ Postal Code _____

Work _____ Email _____

Name _____ Home Address _____

Phone Home _____ City _____ Postal Code _____

Work _____ Email _____

Name _____ Home Address _____

Phone Home _____ City _____ Postal Code _____

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Work _____ Email _____

Name _____ Home Address _____

Phone Home _____ City _____ Postal Code _____

Work _____ Email _____