



International
**LONGSHORE & WAREHOUSE
UNION**

LOCAL 500

PERSONAL INFORMATION SHEET (please print clearly)

Work No. _____

First Name and Middle Initial _____

Last Name _____

Street Address _____

City _____

Province _____

Postal Code _____

Date of Birth (mm/dd/yyyy) _____

Phone No #1 _____

Phone No. #2 _____

Email _____

SIN _____

Gender (check one Male Female

Dated _____

Signature _____