

Communications Energy & Paperworkers Union Of Canada

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CEP LOCAL 26 Bell Bargaining Unit Member Strike / Lockout Registration Form

In the event of a Strike/Lockout, the following information is required so that the Strike Committee can commence their planning:

Bell Employee Number:			
Surname:	Given Name:		
Address:		City:	
Postal Code:	Home Phone #:		
	Home Cell #:		
Со	ompany Contact # Cell:		
Co	ompany Contact # Pager: _		
Work Address:			
Home E-mail Address: (Not a company E-mail Address)			
Are you a member in good standing	g? Yes	No	_
Will you be available for Picket Duty	y? Yes	No	_
Can you be a Picket Captain?	Yes	No	_
If you are prepared to do Picket Dut	ty, which shift would you pro	efer?	
Morning: Afternoo	on: Evening:	Removement of the common streets	Night:
Signature:	Date	a:	