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A Union of Professionals



Montana Federation of Public Employees
1232 E 6th Ave
Helena, MT 59601
800.398.0826
406.442.4250

CONTINUING MEMBERSHIP AUTHORIZATION

Continuing membership indicates membership will continue until terminated in accordance with the bylaws.

Please print clearly

NAME: _____
First Mid. Init. Last

HOME ADDRESS: _____

CITY: _____ STATE _____ ZIP _____

MAILING ADDRESS if different: _____

PHONE: Cell (_____) _____ Work (_____) _____ Home (_____) _____

NON-WORK E-MAIL: _____

LOCAL/CHAPTER: _____

POSITION/JOB TITLE: _____

EMPLOYER: _____ State Employee ID# (if applicable) _____

WORKSITE/BUILDING: _____

REGISTERED NURSE: YES FORMER STUDENT MEMBER: YES

DATE OF BIRTH: MO _____ DAY _____ YR _____

(This information is optional. If you choose not to provide it, this will not affect your membership status, rights, or benefits in any way. This information will be kept confidential.)

American Indian/Alaska Native <input type="checkbox"/>	Hispanic <input type="checkbox"/>
Asian <input type="checkbox"/>	Multi-Ethnic..... <input type="checkbox"/>
Black <input type="checkbox"/>	Native Hawaiian/Pacific Islander..... <input type="checkbox"/>
Caucasian (not Hispanic origin) <input type="checkbox"/>	Other <input type="checkbox"/>
	Unknown <input type="checkbox"/>

MFPE is a unified system of Public Employees
Authorization Form
MFPE, National, and Local

To be completed by member	
Affiliate	Member
National Dues	
MFPE Dues	
Local Dues	
TOTAL	

Dues payments (or a portion) may be deductible as a miscellaneous itemized deduction.

CONTINUING MEMBERSHIP AUTHORIZATION: MFPE membership is continuous from year to year until terminated by written notice to the MFPE President during the termination period (September 1 to September 30 of each year). The member shall notify the employer of specific amounts to be deducted each year or of any membership changes. The employer has no unilateral authority to modify, abrogate, or cancel this authorization.

Signature: _____

Email: _____

DATE _____

LOCAL # _____

Start

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Thumbnail not yet available



Vertical stack of form fields and checkboxes on the left side of the page.

Click here to sign

Input field for email address

Enter your email address

Two small square checkboxes

1 / 1

Three small square checkboxes

Do not submit if you do not trust the requesting party or if you suspect phishing or fraudulent activity

I agree to the [Terms of Use](#) and [Consumer Disclosure](#) of this document



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