

The CATHOLIC LABOR NETWORK

2019 Membership Application

CONTACT INFORMATION

Name: _____
Street Address: _____
City: _____ State: _____ ZIP: _____
Phone: _____ Email: _____

SUPPLEMENTAL INFORMATION (Optional)

I am a: ___ Layperson ___ Priest ___ Deacon ___ Brother ___ Sister
Parish: _____ Diocese: _____

Do you belong to a Labor Union? _____ If yes, which one?: _____
Are you an officer, steward or staff member in your labor union? _____

Are you *employed* by a Catholic institution? _____
Are you a *member* of a Catholic organization? _____

FULL MEMBER (Catholic & Voting Member): _____ \$25.00

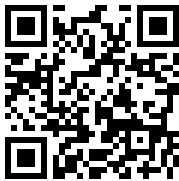
AFFILIATE MEMBER (Non-Voting Member): _____ \$15.00

The **Catholic**



Labor Network

Prefer to join online?



Use QR Code
or visit
www.catholiciabor.org

MAKE CHECKS PAYABLE TO: **CATHOLIC LABOR NETWORK**

Post to:
Catholic Labor Network
7145 Roosevelt Ave.
Falls Church VA 22042

Questions?
E-mail clayton@catholiciabor.org