



Membership Application

Personal Details

_____ (Date)

1. Name _____
(First) (Middle) (Last) (Jr,Sr,Etc)

2. Address _____
 City _____ State _____ Zip _____

3. Primary Phone _____ Home Cell 4. Date of Birth _____
(Month) (Day) (Year)

5. Email _____ 6. SSN (last 4) _____

Membership Details

7. Local Number _____ 8. Requested Membership Date _____
(Month) (Day) (Year)

9. GCA _____ 10. LCA _____

Employment Details

11. Home Terminal _____

12. Employer/Carrier _____

13. Employee ID/ Badge No. _____ 14. Craft (check one to the right)

I hereby make application for membership in the SMART Transportation Division. I pledge my honor to faithfully observe the Constitution and laws of the SMART Transportation Division, including the bylaws of my local; to comply with the rules and regulations for the government of the SMART Transportation Division; not to make known to outsiders any private proceedings for the SMART Transportation Division; to faithfully perform all the duties assigned to me to the best of my ability and skill; to so conduct myself at all times as not to bring reproach upon my union and at all times bear true and faithful allegiance to the SMART Transportation Division.

Respectfully Submitted:

(Applicant's Signature)

I certify that I have witnessed the applicant's signature hereto:

(Signature of Member)

In signing this application, we as members of the above number local, certify that to the best of our belief, the applicant is of good moral character and, if admitted to membership in the SMART Transportation Division, will be a worthy member.

Craft Codes	
<input type="checkbox"/>	Brakeman
<input type="checkbox"/>	Bus Operator/Other Bus
<input type="checkbox"/>	Carman
<input type="checkbox"/>	Clerk
<input type="checkbox"/>	Conductor
<input type="checkbox"/>	Diesel Electrician
<input type="checkbox"/>	Dispatcher
<input type="checkbox"/>	Electrician
<input type="checkbox"/>	Engineer
<input type="checkbox"/>	Fireman
<input type="checkbox"/>	Flight Attendant
<input type="checkbox"/>	Hostler
<input type="checkbox"/>	Lawyer
<input type="checkbox"/>	Machinist
<input type="checkbox"/>	Maintenance of Equipment
<input type="checkbox"/>	Maintenance of Way
<input type="checkbox"/>	Pilot
<input type="checkbox"/>	Police/Investigator
<input type="checkbox"/>	Signal Maintenance
<input type="checkbox"/>	Signalman
<input type="checkbox"/>	Station Master
<input type="checkbox"/>	Switchman
<input type="checkbox"/>	Truck Driver
<input type="checkbox"/>	Yardman
<input type="checkbox"/>	Yardmaster
<input type="checkbox"/>	
<input type="checkbox"/>	Other