



ACFO-ACAF Membership Card and Authorization for Representation

I hereby join/affirm my membership in ACFO-ACAF and authorize ACFO-ACAF to represent me
as my bargaining agent for the CT Group for collective bargaining with my employer and
in respect of the terms and conditions of my employment.

Name (Print): _____

Address: _____

Phone(s): _____

Email(s): _____

Job classification and level: _____ Region: _____

Date: _____ Signature: _____