

**Application for Renewal of Voluntary Membership
2019-2020**

I wish to renew my voluntary membership in OSSTF for the 2019-2020 school year. Enclosed is a cheque in the amount of \$50.00 payable to the Treasurer of OSSTF/FEESO. If certification services are required, please apply directly to the Certification Department at www.osstf.on.ca/services/certification.

Please print:

Last Name First Name.....

Home Address
(Street) (Apt.#)

..... Home Phone No.
(City) (Province) (Postal Code)

Social Insurance No.

OSSTF Membership No.

I hereby consent to the collection, and use of the above-noted information by the Ontario Secondary School Teachers' Federation. This information shall be used exclusively for the purposes of union administration and the representation of our members.

Dated at _____ this _____ day of _____, 2019/2020

Name of applicant (print) Signature of applicant

For Office Use Only	
Rec'd _____ P.E. Memo # _____ App. Date/# _____	<input type="checkbox"/> \$50 <input type="checkbox"/> Doc – Cert
<input type="checkbox"/> Accounting	<input type="checkbox"/> Certification
<input type="checkbox"/> Membership	Ref. #