



Coalition of Black Trade Unionists

Organizing to Empower Working People

Southeastern Pennsylvania and Greater Philadelphia Chapter

Youth Application for Membership

_____ New Member _____ Renewal of Prior Membership

Please Print

Date: _____

Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Home Phone: _____ **Work Phone:** _____

Cell Phone: _____ **Email Address:** _____

Age: _____ (Must be between Ages 12-17 yrs old)

Name of Sponsor: _____

Sponsor's Union Affiliation: _____

Membership Dues (per year) includes membership in the Local Chapter and National CBTU

\$5.00 Fee

Make Checks or Money Orders payable to S.E. PA. Chapter, CBTU

Mail to: Coalition of Black Trade Unionists (CBTU)

PO Box 42536

Philadelphia, Pennsylvania 19101