



**International Alliance of
Theatrical Stage Employees
Local 18**

1110 North Old World Third Street
Suite 650
Milwaukee, WI 53203-1117

414.272.3540 P
414.272.3592 F

Representation

I, hereby authorize Local #18 of the International Alliance of Theatrical Stage Employees (IATSE) to negotiate, bargain collectively and present and discuss grievance with my Employer as my representative and my sole and exclusive bargaining agency. I understand that I am forbidden to waive any provision of IATSE Local #18's contractual agreements for any reason.

Referral Fee Assessment

Also, I hereby authorize my Employer to deduct a Hiring Hall Referral Fee from my gross wages in the amount that is currently applicable, and to remit the same to IATSE Local #18. If my Employer is unable to deduct the Hiring Hall Referral Fee from my wages, I agree to make payment of the Fee within fifteen (15) days from the date of invoice.

Acknowledgement

I acknowledge that I have received a copy of the IATSE Local #18 Hiring Hall Referral List Rules & Regulations and I understand that it is my obligation to notify the IATSE Local #18 Hiring Hall of any changes in the personal information provided below.

Signature: _____ Date: _____

Print Name: _____

Social Security Number: _____

Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Cellular Phone: _____

Alternate Phone: _____