NAME: _				(E	XACTLY	HOW	YOU	WANT	IT	ON	CARD)
	TITLE:						_				
		LOCAL:									
FULL ADDRESS:											
			OFFICE#:								
			CELL#:								
			FAX#:								
			E-MAIL AD	DRESS:							

Please fill out this form and email to Sandra Mombourquette at mombos@unde.org

PLEASE NOTE:

- Fill out only the information above exactly how you want it on your cards;
- DO NOT use the employer's e-mail address, only personal or union-related e-mail addresses;
- COST:

Business Cards paid for by National Office:

Vice-Presidents of the regions;

National Human Rights Advisor

Local Presidents;

Regional Human Rights Coordinators;

Regional Young Worker representatives;

Firefighter Committee members.

*** All others are at the expense of the Local.

Cards will be mailed to you once they are processed.