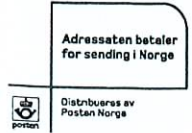




SAFE  
Svaresending 7112  
0096 Oslo



## Welcome as a SAFE member!

**I hereby register as a member of SAFE:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

ZIP-code/ City: \_\_\_\_\_

Telephone: \_\_\_\_\_ D.O.B. (11 digits): \_\_\_\_\_

E-mail address: \_\_\_\_\_

Employer: \_\_\_\_\_

Workplace: \_\_\_\_\_ Position: \_\_\_\_\_

Apprentice from: \_\_\_\_\_ until: \_\_\_\_\_

Permanent employment       Substitute

I accept my employer to perform deduction of wages for union fee.

I hereby inform you to end my membership in union: \_\_\_\_\_

To look out for my conditions as a member I consent SAFE to give up necessary information about my union connection to SAFE/YS associates.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

