

Associate Membership Application

SPEEA Constitution Section 12.6(a):
Dues of Associate Members – The dues shall be one-quarter of the annual dues rate of regular members.

Please make check payable to **SPEEA** and enclose with this application. Mail to SPEEA at the address listed below.

**Society of Professional
Engineering
Employees in Aerospace**
15205 52nd Ave S
Seattle, WA 98188
(206) 433-0991

toll free from Everett
(425) 743-4752
nationwide 1-800-325-0811

(please print)

Name: _____ **Employee ID:** _____
Last First Middle Initial

Address: _____
Street Apt# City State Zip

Home Phone: () _____ **Work Phone:** () _____

Former SPEEA member? Yes No

Formerly in SPEEA Bargaining Unit? Yes No

Reason for leaving SPEEA Bargaining Unit *(if applicable):*

Reclassified to supervision: When? _____ Level: _____

Other _____

If still employed by Boeing: Group _____

Bldg, Floor Bay Location _____

Current employer *(if other than Boeing):* _____

Date: _____ **Signature:** _____

