



Individual Membership Application/Renewal Form

WisCOSH, Inc.
1535 W. Mitchell St.
Milwaukee WI 53204
(414) 933-2338
1-888-947-2674
<http://www.wiscosh.org>
exec_dir@wiscosh.org

Name : _____

Address : _____

Mailing Address : _____

City : _____ State : _____ Zip Code : _____

Phone Number : _____ [primary] This is a cell phone number

Phone Number : _____ [back-up] This is a cell phone number

E-Mail : _____

I would like to be added to the WisCOSH Blog Update List. [<http://www.wiscosh.info>]

This is a renewal membership.

I work in a union shop. Union name and Local _____

I retired from a union shop. Union name and Local _____

Level of membership* :

Low income or student \$10.00/year

Individual \$40.00/year

Sustaining** \$150.00/year

*Membership includes quarterly newsletter and yearly Resource Directory.

** Call for information regarding Sustaining Membership benefits.

I would be interested in volunteering for WisCOSH activities such as mailings, phone calls, or special events. Please call me.

Signature : _____ Date : _____