



LABOR AND EMPLOYEE RELATIONS GROUP

Membership Application

Please complete this form and return it to:

Taryn Johnson, Training Manager

taryn@nwppa.org

fax: 360-254-6731

Name of Utility:	
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Type of Utility:	Municipal	PUD	Cooperative	Investor-owned	Government	Other
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Number of full-time employees:	
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Key Contact Person for the Labor and Employee Relations Group:

Please indicate who will be your main contact for receiving invoices and communications. In addition, this person will be required to grant permissions to add other labor and employee relations personnel from your utility to the ListServ and Newsletter e-mail list.

Name:	Job Title:
Mailing Address:	
City:	State/Zip:
Phone:	E-mail Address:

Journeyman Lineman Survey Key Contact Person:

Who should receive the annual questionnaire to be filled out and returned for the journeyman lineman survey?

Name:	Job Title:
Mailing Address:	
City:	State/Zip:
Phone:	E-mail Address: