



RADIO and TELEVISION
BROADCAST ENGINEERS UNION LOCAL 1200
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
6500 Seven Locks Rd. Suite 200, Cabin John, MD 20818
Phone: (301) 661-8544

Dear Applicant:

Welcome to IBEW Local Union 1200. The International Brotherhood of Electrical Workers (IBEW), a union of 750,000 members, is dedicated to securing good wages, solid benefits, and safer job sites for its' members. Since forming in 1959, IBEW LU 1200 represents hundreds of members who are an integral part of the broadcasting business. With 14 collective bargaining agreements, our members are engaged in every aspect of the industry, working at local television and radio stations of every network affiliation throughout the Southeastern United States, from Maryland to Louisiana. Our LU 1200 technicians are vital to coverage of the vast majority of major sporting events, including NFL, MLB, NASCAR, the PGA Tour, NCAA football and basketball, and US Open tennis.

What are Union Dues?

Union dues are funds provided by union members to financially support the goals of their organization. The international portion of dues supports the representation, research, legal, administrative, and legislative needs of members on a national level. The local union and working dues support members at the local level and expenses such as legal representation, handling grievances, arbitrations, contract negotiations, organizing activities, rent and administrative fees.

To provide the economic resources to achieve their goals, members of LU 1200 determined the amount of union dues paid to their local union by democratic majority vote. The IBEW dues structure is as follows:

IBEW Dues Structure for 2023	Member pays:
Initiation Fee	\$200 per initiation
Basic LU 1200 Dues	\$10 monthly
Basic IO Dues	\$22 monthly
Basic Working Dues	2% of base wages (\$25 monthly minimum)

This office submits monthly statements to its' members. All statements will be billed at the working dues rate, plus the basic local and international dues.

Paying on Time

Any member whose membership dues are in arrears by 3 months or more will be charged a reinstatement fee of \$3. Any member whose dues are in arrears by 6 months or more may be dropped from membership and required to reinitiate.

Any member leaving the industry for greater than two months of time can request to be put on Honorary Withdrawal (HW). This puts your membership on hold until you work again. HW status requires notification in writing prior to the first of the month you wish to go on HW, and that your dues are paid current. If you get a call to start working again, send the appropriate basic and international dues along with the month you are returning to active status. If your membership is not activated when you start working again, you may be billed for months you did not actually work.

Should you have any questions or wish to contact us, please contact:

IBEW Local Union 1200

6500 Seven Locks Rd. Suite 200, Cabin John, MD 20818

301-661-8544 (office)

geoff.turner@ibew1200.org

jackie.witherow@ibew1200.org (Office Manager)

Sincerely,

A handwritten signature in black ink that reads 'Geoff Turner'.

Geoff Turner

Business Manager/Financial Secretary

Attachments



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IBEW Local Union 1200 Membership Application Checklist

Please complete, sign, and submit the following:

1. Local Union 1200 Application
2. \$200 Initiation Fee (paid by check, or online at <https://ww2.payerexpress.com/ebp/IBEW1200/Login/Index>)
3. IBEW Obligation Form
4. Dues Deduction Form (not required for Freelance workers)

Please complete and return the Application and Obligation Form by email or text to:
Jackie.Witherow@ibew1200.org or (301) 661-8544



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MEMBERSHIP APPLICATION

Please print or type clearly

Last Name:	First Name:	MI:
Street Address:		
City:	State:	Zip code:
Cell phone:	Position(s) held:	
Date of birth:		
Last 4 of your SSN:		
Employer:		

Please select your abilities: <input type="checkbox"/> Audio <input type="checkbox"/> Camera <input type="checkbox"/> CMX Editing <input type="checkbox"/> Editing <input type="checkbox"/> ENG <input type="checkbox"/> Lighting <input type="checkbox"/> Maintenance <input type="checkbox"/> Video <input type="checkbox"/> Videotape <input type="checkbox"/> Utility <input type="checkbox"/> Other- Please specify:		
Employment is: <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Part-Time <input type="checkbox"/> Freelance		
Hired by & Dept:	Starting Salary: \$	<input type="checkbox"/> per week
	<input type="checkbox"/> per day	

Have you ever been a member of a labor union? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you now a member of any other IBEW local? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, Local #: Card Number:
Last employer:	Last position held:
Reason for leaving:	Length of service at previous employer:
Applicant's Signature:	Date:

Shop Steward Report (Staff only)	
Collection or verification of initiation fee: <input type="checkbox"/> Yes <input type="checkbox"/> No Remarks: I recommend this application be: <input type="checkbox"/> Accepted <input type="checkbox"/> Denied	
Stewards Signature:	
Action Taken	
Application Received at LU 1200: <input type="checkbox"/> Accepted <input type="checkbox"/> Denied	
\$200 initiation fee received: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> by check (#) <input type="checkbox"/> Online Payment	Initiation Date: ___/___/___ Card Number:



Application for Membership USA

Form No. 107 Rev 05/20

[PLEASE PRINT OR TYPE FULL NAME]

FIRST NAME

M.I.

- MR
- MS
- MRS

LAST NAME

- JR
- SR
- II
- III
- IV
- V

ADDRESS (STREET & NUMBER)

CITY

STATE

ZIP CODE+4

EMAIL ADDRESS

DATE OF BIRTH (mm/dd/yyyy)

DATE OF HIRE (mm/dd/yyyy)

SOCIAL SECURITY NO. (Last four only)

TELEPHONE NO.

PRESENT EMPLOYER

CLASSIFICATION

INDUSTRY WHERE YOU ARE EMPLOYED

- RAILROAD
- GOVERNMENT
- INSIDE CONSTRUCTION & MAINTENANCE
- OUTSIDE CONSTRUCTION & MAINTENANCE
- UTILITY
- TELECOMMUNICATIONS
- BROADCASTING
- MANUFACTURING
- OTHER

HOW DID YOU BECOME AN I.B.E.W.® MEMBER?[SELECT ONE]

- I WAS ORGANIZED
- I WAS ORGANIZED AS AN APPRENTICE
- I WAS SELECTED FOR AN APPRENTICESHIP
- I AM A NEW HIRE
- OTHER

* Gender MALE FEMALE

* RACE AND ETHNICITY

- WHITE
- BLACK
- ASIAN
- LATINO
- TWO OR MORE RACES
- NATIVE AMERICAN/INDIGENOUS
- NATIVE HAWAIIAN / OTHER PACIFIC ISLANDER

Are you a Veteran of the Armed Forces?

- Yes
- No

REGISTERED VOTER?

- Yes
- No

HAVE YOU EVER BEEN A MEMBER OF THE I.B.E.W.®?

- YES
- NO

IF SO, WHERE? LOCAL UNION STATE

*Submission of this information is voluntary and will be kept confidential. The particular categories of gender, race, and ethnicity collected are those sought by applicable federal laws under which certain local unions must report such information on an aggregate and summary basis to the federal government. If you choose not to self-identify, the federal government may require this information to be determined by visual survey and/or other available information.



OBLIGATION OF I.B.E.W.®

"I, the undersigned, in the presence of members of the International Brotherhood of Electrical Workers®, promise and agree to conform to and abide by the Constitution and laws of the I.B.E.W.® and its Local Unions. I will further the purposes for which the I.B.E.W.® is instituted. I will bear true allegiance to it and will not sacrifice its interest in any manner."

LOCAL UNION APPLICATION DATE(mm/dd/yyyy)

TO BE SIGNED BY APPLICANT - PLEASE DO NOT PRINT *

THIS PORTION TO BE FILLED OUT BY L.U. FINANCIAL SECRETARY

CARD NUMBER

INITIATION DATE(mm/dd/yyyy)

INITIATION FEE PAID

* TYPE OF MEMBERSHIP "A" "BA"

PAID \$2.00 PENSION ADM. FEE? Yes No

Dues Deduction Authorization

I hereby voluntarily authorize my Employer _____, or its successors or assigns ("the Employer") to deduct from my pay each pay period an amount of dues and initiation fees fixed in accordance with the Bylaws of Local Union _____ or its successors or assigns ("the Union") and the Constitution of the International Brotherhood of Electrical Workers, or such lesser amount as required by law, and to pay same to the Union in accordance with the terms of the bargaining agreement between the Employer and the Union.

This authorization shall be irrevocable for a period of one year from the date hereof or until the termination date of the bargaining agreement between the Employer and the Union, whichever occurs sooner, without regard to whether I am a member of the Union during that period, and shall automatically renew and be irrevocable for successive periods of one year unless I give the Employer and the Union written notice of revocation during the ten (10) day period prior to the anniversary of this authorization or during the ten (10) day period beginning on the termination date of the agreement, whichever comes first.

I recognize that signing this authorization of payroll deductions is not a condition of employment, and that my authorization, and the continuation of such authorization from year to year, is voluntary and applies regardless whether I am a union member.

I understand that under current law the payments covered by this authorization are not deductible as charitable contributions for federal income tax purposes.

Name (First M Last)

Signature

Date mm/dd/yyyy

Dept.

Form 66 05/20

FOR UNION FILE WITH COPY TO EMPLOYER