



Branch Members

Request for Exemption from UNWLA Membership Dues

Branches which are unable to pay dues for members who due to health issues, receive care in nursing homes, hospitals, senior centers or at home, may apply for exemptions from UNWLA dues for these members.

If Branch Financial Report for 12/31/___ shows a balance of over \$750, the Branch is considered capable of paying the dues for this member.

- Regional Council: _____
- Branch #: _____ Member since: _____
- Member's Name: _____
- Home Address: _____
- Date of Birth: _____
- Currently residing: Home Hospital Senior/Nursing Home Center
- Briefly explain member's circumstances for requesting an exemption from UNWLA Membership Dues for the year 20____:

Required Signatures:

Branch Secretary: _____

Branch President: _____

Reg. Council Pres.: _____

Please send the completed form to UNWLA Headquarters with the Branch annual dues payment due February 15th. Your request will be reviewed by the UNWLA Executive Committee upon the recommendations of the 2nd Vice President for Membership.