

# IBEW LOCAL UNION 55 RE-REGISTRATION FORM

**You must re-register between the 10<sup>th</sup> through 16<sup>th</sup> of each month.**

In Person

Email: [referral@ibew55.org](mailto:referral@ibew55.org) Subject: Renewal

Fax: 515-265-6194

Mail : IBEW Local Union 55, 1435 NE 54<sup>th</sup> Avenue, Des Moines, IA 50313

**(When mailing your re-register, it MUST be received by the 16<sup>th</sup> of each month. Any re-register form received after the 16<sup>th</sup>, will not be accepted.)**

You may obtain this form on our website at [ibew55.org](http://ibew55.org) and copy as needed.

**Check here if any of your information has changed.** (If checked you must contact Local 55 to update your information)

My original sign date was: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_  
Street \_\_\_\_\_ Apt./Unit Number \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Primary Phone:  Home  Cell (\_\_\_\_\_) \_\_\_\_\_ Sec. Phone:  Home  Cell (\_\_\_\_\_) \_\_\_\_\_

Home Local # \_\_\_\_\_ IBEW Card # \_\_\_\_\_

If you're not an IBEW member DL # \_\_\_\_\_ or state ID # \_\_\_\_\_

### **Journeyman Tech**

Book 1 \_\_\_\_\_  
Book 2 \_\_\_\_\_  
Book 3 \_\_\_\_\_  
Book 4 \_\_\_\_\_

### **Equipment Operator**

Book 1 \_\_\_\_\_  
Book 2 \_\_\_\_\_  
Book 3 \_\_\_\_\_  
Book 4 \_\_\_\_\_

### **Groundman/ Truck driver**

Book 1 \_\_\_\_\_  
Book 2 \_\_\_\_\_  
Book 3 \_\_\_\_\_  
Book 4 \_\_\_\_\_

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I understand that if I am removed from the Out-of-Work list due to: six (6) refused offers of work; failure to re-register between the 10<sup>th</sup> & 16<sup>th</sup> of the month; accept a job then turns it down; or I'm a no show for an accepted job, **Only in-person registration will be accepted to be placed back on the Out-of-Work list.** I also understand it is my responsibility to confirm that IBEW Local 55 receives my re-registration form. If you have any questions, please call Local 55 (515) 265-6193.

Name: \_\_\_\_\_

Ticket#: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

\_\_\_\_\_  
**Signature of Union Staff**