



INTERNATIONAL ALLIANCE OF THEATRICAL STAGE EMPLOYEES,
MOVING PICTURE TECHNICIANS, ARTISTS AND ALLIED CRAFTS
OF THE UNITED STATES, ITS TERRITORIES AND CANADA, AFL-CIO, CLC

Hall:
1513 Paulsen St.
Savannah, GA 31401

Local Union No. 320
Chartered February 6, 1914

Mail:
PO Box 5731
Savannah, GA 31414

Phone: (912) 232-2203

Fax: (404) 920-4356

iatse320@gmail.com

www.iatse320.org



ASSESSMENT CHECK-OFF AUTHORIZATION

To: All Employers

Effective immediately the undersigned hereby assigns to I.A.T.S.E. Local # 320 of Savannah Georgia four percent (4%) of all gross wages that are earned by him or herself and authorizes and directs his employer to deduct such four percent (4%) from all wages earned and remit those deducted wages to I.A.T.S.E. Local # 320. This assessment of wage and assignment to I.A.T.S.E. Local # 320 shall be irrevocable for a period of one (1) year, from this date, and shall be applicable at all theaters, arenas, convention centers, exposition halls, hotel ballrooms and/or any other job locations within the jurisdictional boundaries of I.A.T.S.E. Local # 320. Further, this four percent (4%) assessment will automatically be renewed upon the expiration date, so long as the person is a member of or works under a contract of I.A.T.S.E. Local # 320.

In signing this check-off authorization, I do so voluntarily, knowing that it is not a condition of employment.

Employee Name: First / MI / Last

Current Address: Street

____ - ____ - ____
Social Security Number

City / State / Zip

Birthdate: Month / Day / Year

Phone Number (mobile and/or home)

Email Address

Employee Signature

Date

Please Print Clearly!