



**INTERNATIONAL ASSOCIATION OF MACHINISTS  
AND AEROSPACE WORKERS, LOCAL LODGE 99**



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**LL99 Steward Information**

(Please print legibly)

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

**Phone#:** \_\_\_\_\_ **Cell#:** \_\_\_\_\_

**Personal Email:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Company:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Branch:** \_\_\_\_\_

**Completed Training:**


**Signature:** \_\_\_\_\_

Please email this form to [rhuppee@iamaw99.ca](mailto:rhuppee@iamaw99.ca) as soon as possible.