

2012 Lobby Day at the Capitol Pre-Registration Form

Local Union, CLC or Council: _____

Contact Person: _____

Please type or print clearly. Members' home information is requested for gathering correct district and legislator information. If more space is needed, please copy this form.

NAME: _____

UNION: _____

MEMBERS' HOME ADDRESS (NO P.O. BOXES):

HOME #: _____

ALTERNATE #: _____

E-MAIL: _____

IF KNOWN: SENATE DISTRICT: _____

HOUSE DISTRICT: _____

NAME: _____

UNION: _____

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HOUSE DISTRICT: _____

Return to: Colorado AFL-CIO - Fax: (303) 433-1260