



INTERNATIONAL UNION, UNITED AUTOMOBILE, AEROSPACE & AGRICULTURAL IMPLEMENT WORKERS OF AMERICA - UAW

SHAWN FAIN, *PRESIDENT* • MARGARET MOCK, *SECRETARY-TREASURER* VICE-PRESIDENTS: CHUCK BROWNING • MIKE BOOTH • RICH BOYER

May 7, 2024

Dear Local Union Presidents:

The 115<sup>th</sup> NAACP Annual Convention will be held in Las Vegas, Nevada July 13-17, 2024, at the Mandalay Bay Convention Center.

To have a voice and fully participate at the Convention, we would like to *encourage that delegates* attending the Convention be elected as *voting delegates* from their respective local NAACP unit or branch. To register for the NAACP Convention, go to <a href="https://naacp.org/convention">https://naacp.org/convention</a>.

Enclosed is a <u>UAW Delegate Information Form.</u> Please complete one form for each delegate. This information will allow the Civil and Human Rights Department to keep you updated of events, both before and during the convention. Please email the completed **UAW Delegate Information Forms** to the UAW Civil and Human Rights Department at <u>civilrights@uaw.net</u>.

Finally, we are asking for your help to solicit NAACP memberships. We have enclosed a copy of the NAACP membership application. This form can be duplicated. It is very important for everyone attending the convention to be a current NAACP member; and, where possible, to serve as a represented elected delegate from your respective NAACP branch. We are asking Local Union Civil and Human Rights Committee members and any other interested officers, leadership, and members to consider supporting this vitally important organization through your active membership and dues.

Thank you for your participation; I look forward to seeing you at the Convention.

In solidarity,

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Helen Walker, Director Civil and Human Rights Department

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## UAW DELEGATE INFORMATION FORM 115th Annual NAACP Convention July 11-17, 2024 Las Vegas, Nevada

Please complete a separate form for each Delegate.

Please type or print:

UAW Region:	Local Union #:	
Name:		
Address:		
City:	State:	Zip:
Work Phone: ( )	Cell Phone: ()	
Email Address:		
Name of hotel where you will be staying while at the convention:		

Note: This is not the conference registration form. This information will allow the UAW Civil and Human Rights Department to keep you updated of events before and during the convention.

EMAIL THIS FORM ONLY TO THE UAW CIVIL & HUMAN RIGHTS DEPARTMENT

civilrights@uaw.net

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<b>DURING OUR</b> 1909 Membership is the life-blood of the	<b>MEMBERSHIP CAMPAIGN</b> he NAACP. We depend on our members' generosity to insure	
<b>DURING OUR</b> 1909 Membership is the life-blood of the	MEMBERSHIP CAMPAIGN	
the NAACP's independence. We d	lepend on you to keep the flames of freedom burning bright!	
<b>1 MEMBER INFORMATION</b> (please print clearly	γ)	
□ Mr. □ Mrs. □ Ms. □ Miss □ Other □ □ □ □ □	Date Date	
First Name     M.I.     Last Name		
Address	Apt./Suite	
L I I I I I I I I I I I I I I I I I I I	State Zip	
Unit Affiliation	Current Membership No. ( <i>if renewal</i> )	
Phone No.     Email Address		
Are You A Registered Voter?       Yes       No         Campaign	ame	
2 MEMBERSHIP TYPE (please check one)		
REGULAR ANNUAL MEMBERSHIP	LIFETIME MEMBERSHIP	
<ul> <li>Regular Adult (Ages 21 &amp; older)</li></ul>	Junior Life (Payable in annual installments of \$25 or more) \$100** (Ages 13 & under) // Date of Birth	
□ Youth without Crisis Magazine (Ages 17 & under) .\$10	<ul> <li>Bronze Life (Payable in annual installments of \$50 or more)\$400** (Ages 14-20) Date of Birth</li> <li>Silver Life (Payable in annual installments of \$75 or more)\$750**</li> <li>Gold Life (Payable in installments of \$150 or more)\$1,500** Only available to Silver or Regular Life Members</li> </ul>	
Annual Corporate		
** Fully-paid Life Memberships include a 10-year subscription to The CRISIS Magazine		
<sup>\$</sup> 6.00 per year of the membership fee will be applied toward your subscription to THE CRISIS	Diamond Life (Payable in installments of \$250 or more) \$2,500** Only available to Gold or Golden Heritage Life Members	
B PAYMENT		
Amount Paid \$	VISA American Express Cash Cash	
Credit Card Number		
Name as it Appears on Card Authorized Signature		