

**WEA LOCAL AFFILIATE DELEGATE/SUCCESSOR DELEGATE ELECTION VERIFICATION/CREDENTIAL FORM**

I hereby register the following local affiliate delegates to the WEA RA and certify that they have been elected as prescribed by WEA Credentials documents.

**DUE FEBRUARY 7, 2014**

Local President (or designee) Signature and Date

Local President email address (or phone if email unavailable)

WEA Local Affiliate: \_\_\_\_\_  
(Please spell out local name, no acronyms)

UniServ Council: \_\_\_\_\_

*Current WEA Board Members and UniServ Council Presidents are already pre-registered as Ex-Officio voting delegates to the WEA RA and should NOT be listed on this form as Local Delegates*

***If any delegates need special accommodation beyond ADA access, please attach a separate document with specific requests***

Delegate Name (Please type or print legibly)	First name on Badge if different than Delegate legal name	Address, City, Zip (Please verify current home mailing address with Delegate. Please indicate if you are requesting the temporary credential be sent to an address other than the Delegate's home, i.e. work)	Please check if member of color	Delegate (D) or Successor (S)?

WEA encourages **larger affiliates (5 or more delegates)** to save postage and organize effective delegations by having all Delegate packets and Temporary Credentials shipped together to one, central location rather than separately to individual delegates.

**YES!** Please ship all packets and credentials for our affiliate's delegates and successors to the address listed here:

Recipient / Address Owner \_\_\_\_\_

Unit / Ste / PMB \_\_\_\_\_

Street Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

**MUST BE RECEIVED AT THE WEA OFFICE IN FEDERAL WAY BY 4:00 P.M., FRIDAY, FEBRUARY 7, 2014**

WEA Credentials Work Team  
c/o Tom Baier  
PO Box 9100  
Federal Way, WA 98063-9100

**OR FAX to 253-765-7110**  
(If you fax this document, please complete and use the attached fax cover)