

Resignation

Name:			
CFMEU Membership Number: Trade:			
Address:			
Mobile Number:			
Please return this completed form to:			
queries@cfmeu.org			
I hereby resign from the CFMEU for the following reasons: Please tick one:			
□Unemployment	□ Injury (Date of Injury)		□Retirement
☐ Permanently out of trade	□Sickness		☐ Going overseas
☐ Financial difficulty	□Other		
Is there any other information you would like to give us about your resignation:			

Signature: