



IBEW Local 876

FR Clothing Enrollment Form

You must choose one of the following Vendors to assign your FR Clothing Allowance Account to. Please make your selection by checking the appropriate Vendor box below.

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Tyndale USA

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Northern Lights Family Outfitters

Employee Information

Employer: _____

Please be sure to print clearly

Personal Information

Full Name:

Last

First

M.I.

Email:

(Email address is required for the Vendor to set up your online account & login to place FR orders)

IBEW Member

Card #:

Mailing Address:

Street Address

Apartment/Unit #

City

State

ZIP Code

Shipping Address:

(If other than mailing)

Street Address

Apartment/Unit #

City

State

ZIP Code

Cell Phone:

Alternate Phone:

Job Information

Classification:

Supervisor:

Start Date:

Employee Signature:

Sign

Date