

HONORABLE WITHDRAWAL FORM

**** MEMBER TO KEEP A COPY ****

Date: _____

I, _____, do hereby request an Honorable Withdrawal from IATSE Local 728, issued as of this date, _____, (month, day, year) in the _____ Quarter of 20 _____. (number) (year)

(Address, City, State, Zip Phone)

Email: _____

You **must** be a member in good standing and be paid in full for the quarter you wish to take an Honorable Withdrawal. You **must surrender your current Membership card** to be issued an Honorable Withdrawal card. If you do not have your card, a duplicate card must be ordered from the International in New York to be placed in your records. (There is a service fee of \$5.00 payable at this time for a duplicate card.)

If you wish to reinstate at any time from Honorable Withdrawal, per **Article 21, Section 14** of the IATSE Constitution, IATSE Local 728 must first request permission on your behalf from the International Alliance. Once the IATSE has completed their investigation and permission is granted you will be required to pay the per capita tax for each quarter you were on Honorable Withdrawal, a reinstatement fee of **\$100.00**, and the current quarter’s dues. **Only after this process will you be allowed to work in the jurisdiction of Local 728.**

If you take an honorable withdrawal and do not perform covered work and have contributions made to your MPIPHP account, you may incur a break in service that may affect your retirement benefits. Please call MPIPHP or the Local for more information.

In addition, per **Paragraph 68 (d) (1) (i) “Seniority” of the Local 728 Basic Agreement:** *“A person shall be removed from the Industry Experience Roster and the Studio Seniority Roster if such person has not been employed for at least one (1) day...within a consecutive three (3) year period.”*

I have read the above statements and signed below:

Member signature Date

Surrender Membership Card _____

Member received copy _____
Member’s Initials

Withdrawal processed by: _____
Signature Date