

# CONSENT TO SERVE

## Seattle Children's Hospital

Local Unit Officer Election 2026-2028

I agree to serve as \_\_\_\_\_ Local Unit Officer Position

Unit \_\_\_\_\_ Shift \_\_\_\_\_ FTE \_\_\_\_\_

Name: \_\_\_\_\_

Mobile/Home Phone: \_\_\_\_\_

Personal Email: \_\_\_\_\_

I understand my responsibilities and commitments that I will attend Executive Committee Meetings, the joint labor-management Conference Committee, and any other meetings, and fulfill my role in the office for which I am nominating myself.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Nominations with the Consent to Serve Form must be  
emailed to [Lburbank@wsna.org](mailto:Lburbank@wsna.org)  
or  
received at the WSNA office  
by the close of business March 31, 2026!**

WSNA Office  
575 Andover Park W. Ste. 101  
Seattle, WA 98188  
Fax: 206-575-1908