CONSENT TO SERVE

Seattle Children's Hospital

Local Unit Officer Election 2026-2029

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
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