



SWAFAA

TOGETHER WE ARE ONE

Authorization Card

I hereby authorize the Southwest Airlines Flight Attendant Association (SWAFAA) to act as my collective bargaining representative under the Railway Labor Act the craft or class of Flight Attendants at Southwest Airlines.

Print Full Name: _____

Employee #: _____

Base/Domicile: _____

Email (non-work): _____

Phone #: _____

Signature (Required): _____

Date (Required): _____

Only original handwritten signatures are valid. Cards are valid for one year from date signed.



**BUILT DIFFERENT.
WE'RE NOT
LIKE THE REST.
WE'RE
SWAFAA.**

“ WE DESERVE A UNION THAT'S
TRANSPARENT, ACCOUNTABLE,
AND 100% FOCUSED ON
SOUTHWEST AIRLINES
FLIGHT ATTENDANTS.
EVERY DOLLAR. EVERY DECISION.
EVERY TIME. **”**



**SCAN.
SIGN.
SHARE.**

<https://qrto.to/9f8ea840>



SWAFAA.COM

LEARN MORE. GET INVOLVED.



MAIL TO:
SWAFAA Organizing Group
PO Box 25
Fulshear, TX 77441

OUR STRENGTH. OUR VOICE. OUR FUTURE.