



CONSENT TO SERVE

WSNA at WhidbeyHealth

Local Unit Officer Election 2022-2025

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: _____

Return this form by June 10, 2022, to:

Fax: 206-575-1908

U.S. Mail in by or before June 10, 2022 or scan and email to

Sara Frey, JD, BSN, RN

WSNA Nurse Representative

575 West Andover Parkway Suite 101

Seattle, WA 98188

Questions? Please contact WSNA Nurse Rep Sara Frey at sfrey@wsna.org

or Ph 206-575-7979, Ext. 3039