

UNITED STATES DISTRICT COURT
DISTRICT OF NEVADA

BRIELLE MEAGHER, individually, and on
behalf of all others similarly situated,

Plaintiff,

vs.

TELUS INTERNATIONAL (U.S.) CORP.

Defendant.

Case No.: 2:20-cv-02074-RFB-DJA

CONSENT TO JOIN

1. I consent to the filing of this form in, and to join and become a plaintiff in the above-captioned collective action lawsuit to pursue my claim for unpaid overtime hours worked before my scheduled shift and/or upon returning from my unpaid meal break against Telus International (U.S.) Corp. while working as an hourly-paid, non-exempt call center agent, at any time within the period of November 2017 to present.
2. I understand that this lawsuit seeks unpaid overtime wages, liquidated damages, and attorneys' fees and costs under the Fair Labor Standards Act and similar relief under applicable state wage-and-hour laws. I consent to be bound by the Court's orders and decisions in this case.
3. I designate the law firms and attorneys at Brown, LLC and Kemp Jones LLP as my attorneys to represent me in this lawsuit.
4. I consent to having the Named Plaintiff Brielle Meagher pursue this lawsuit on my behalf, and I designate the Named Plaintiff to make decisions on my behalf concerning the litigation, including decisions regarding settlement or trial, negotiating a resolution of my claims and entering into an agreement regarding attorneys' fees and costs, and I understand and agree to be bound by such decisions.
5. In the event my claims are dismissed or withdrawn from the above-captioned lawsuit without prejudice, I authorize Plaintiffs' counsel Brown, LLC to use this consent form to re-file my claims in a separate or related action against Telus International (U.S.) Corp..

Signed: _____

Dated: _____

Name: _____

ADDITIONAL INFORMATION
(Privileged and Confidential)

**Please enter the following information, unless you have already completed a questionnaire.
This information will not be filed with the Court:**

Address: _____ **Tel. Number:** _____
Street

_____ **E-mail Address:** _____
City, State, Zip Code

(Please provide any future updates to your contact information while the case is pending)

**Dates Employed by
Defendant:**

_____ _____
Starting month/year *Ending month/year*

**Position(s)
Held:**

_____ _____
*If you held multiple positions,
please include dates for each*

Work Location(s):

_____ _____
City/State

RETURN COMPLETED CONSENT-TO-JOIN FORM TO:

Brown, LLC
111 Town Square Place, Suite 400
Jersey City, NJ 07310
(877) 561-0000 (office); (855) 582-5297 (fax)
flsagroup@jtblawgroup.com

You may return your form by mail, fax, e-mail, or electronic signature.