



2019-2020 Membership Contract
Wyoming Education Association (WEA) National Education Association (NEA)
PLEASE PRINT AND FILL OUT EVERY BOX/LINE, THEN SIGN & DATE IN APPROPRIATE PLACE(S)



First Middle Last

SSN: Date of Hire: *Cell Phone (Preferred):

Mailing Address: Home Phone:

Apartment, Lot, or Unit #: **Home Email (Preferred):

City/State/Zip: Work Email:

If mailing address is a **PO Box**, provide **Street Address** with Zip in below box:

**By providing my phone number, I understand that the National Education Association, NEA Member Benefits, NEA360 and the WEA may use automated calling techniques and/or text message me on my cellular phone on a periodic basis. Neither the NEA nor any of its affiliates will ever charge for text message alerts. Carrier message and data rates may apply to such alerts."

Ethnicity: (choose from list on back of form)

DOB: / / Gender:

**By providing my email, I consent to receive email updates from the Wyoming Education Association."

Local Association Name:

Position (choose from list on back):

School Building/Work Site/Campus:

Subject (choose from list on back):

Affiliate	Membership Type (see information on back of member's copy)	Annual Dues
NEA		
WEA		
LEA		
WEA-PACE (\$20 suggested)		
NEA Fund for Children and Public Education		
Total		

Select Payment Method

- Check, please write Check Number _____
- Credit Card-I'm authorizing the payment of my annual dues.
 - Please call for Credit Card Information
 - Type of Credit Card: _____
 - Credit Card Number: _____
 - Expiration Date (MM/YYYY): _____
 - 3-digit number on back of card: _____
- Electronic Funds Transfer (EFT) – **attach EFT Form and Voided Check**
- Payroll Deduction

Membership Commitment: "Yes - I want to join my colleagues by becoming a member of my local association, the WEA, and the National Education Association. I hereby request and voluntarily accept membership in these associations and agree to abide by the Constitution and Bylaws of all three associations."

Annual Payment Authorization: Yes - I hereby agree to pay the annual dues, fees, and assessments established by the three associations in consideration for the services the union provides. I understand that those annual amounts are subject to periodic change by the governing bodies of the associations. I authorize on a continuing basis, and regardless of my membership status, the payment of those annual amounts established by the three associations through payroll deduction or other payment arrangements unless I revoke this authorization in a written signed letter sent via U.S. mail sent to the address below or a confirmed email sent to lbottom@wyoea.org between **September 1 and September 20** of each calendar year.

Note: "Dues payments are not deductible as charitable contributions for federal income tax purposes. Dues payments (or a portion) may be deductible as a miscellaneous itemized deduction."

I UNDERSTAND THAT THIS AGREEMENT IS VOLUNTARY AND IS NOT A CONDITION OF EMPLOYMENT AND THAT I HAVE THE LEGAL RIGHT TO REFUSE TO SIGN THIS AGREEMENT WITHOUT SUFFERING ANY REPRISAL.

Member's Signature: _____ **Date:** _____

WEA-PACE membership - \$20 WEA PACESETTER - \$50 WEA Super PACESETTER - \$100 or more

The Wyoming Education Association Political Action Committee for Education (WEA-PACE) collects voluntary contributions from Association members and uses those contributions for political purposes, including to endorse candidates for state/local office who promote public education and public school and college employees. A representative committee makes endorsements of candidates in a non-partisan fashion. Contributions to WEA-PACE are voluntary; contributing is neither a condition of employment nor of membership in WEA, NEA, or any of its affiliates, and members have the right to refuse to contribute without suffering any reprisal.

NEA Fund for Children and Public Education – suggested donation \$15

The NEA Fund for Children and Public Education (NEA Fund) collects voluntary contributions from Association members which are used for political purposes, including, but not limited to, making contributions to and expenditures on behalf of friends of public education who are candidates for federal office. *Only U.S. citizens or lawful permanent residents may contribute to the NEA Fund.* Contributions to the NEA Fund are voluntary; making a contribution is neither a condition of employment nor membership in the Association, and members have the right to refuse to contribute without suffering any reprisal. Although The NEA Fund for Children and Public Education requests an annual contribution of \$15, this is only a suggestion. A member may contribute more or less than the suggested amount, or may contribute nothing at all, without it affecting his or her membership status, rights, or benefits in NEA or any of its affiliates. Contributions to the NEA Fund for Children and Public Education are not deductible as charitable contributions for federal income tax purposes. Federal law requires political committees to report the name, mailing address, occupation, and name of employer for each individual whose contributions aggregate in excess of \$200 in a calendar year. Federal law prohibits The NEA Fund from receiving donations from persons other than members of NEA and its affiliates, and their immediate families. All donations from persons other than members of NEA and its affiliates, and their immediate families, will be returned forthwith.

I agree to contribute the amount listed above for WEA-PACE and/or NEA Fund for Children - Member's Signature: _____ **Date:** _____

Contract for Continuous Membership Payroll Deduction Authorization

I hereby instruct and authorize (Employer) _____ to deduct from my salary and transmit to The Wyoming Education Association, in accordance with the agreed upon payroll deduction procedure, my professional dues in an amount as may be determined this membership year and each membership year thereafter. **AUTHORIZED DUES DEDUCTION CANNOT BE REVOKED DURING THE MEMBERSHIP YEAR AND DUES ARE NOT REFUNDABLE. I understand that I may revoke this authorization before September 20 of any calendar year for the ensuing year by giving written notice to that effect to my employer's payroll office, the local association, and the WEA office.** I understand that, should I terminate my employment or wish to terminate my membership at any time within the membership year, I will owe the remaining dues balance for that membership year. I understand that my local, WEA, and NEA will not refund to me any amount already paid.

I hereby waive all right and claim for said monies so deducted and transmitted in accordance with this authorization and relieve the school board and all its officers from any liability. Dues payments are not deductible as charitable contributions for federal income tax purposes. Dues payments (or a portion) may be deductible as a miscellaneous itemized deduction.

Member's Signature: _____ **Date:** _____

Recruited by: _____