



**2010-2011 Membership Enrollment Form**  
 Kansas & National Education Association  
 715 SW Tenth Avenue – Topeka, KS 66612-1686



*Required fields shown in red. Failure to complete will delay processing time of your membership.*

Name \_\_\_\_\_  
Last Name First Name Middle Name

Social Security # \_\_\_\_\_ Minimum of Last Four Digits Required

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone H: \_\_\_\_\_ W: \_\_\_\_\_

Home Email: \_\_\_\_\_

School Email: \_\_\_\_\_

Local Association \_\_\_\_\_

Employer (USD) \_\_\_\_\_

Building Name \_\_\_\_\_

Were you a student member last year? \_\_\_\_\_ YES \_\_\_\_\_ NO

Is this your first year teaching? \_\_\_\_\_ YES \_\_\_\_\_ NO

For how many years? \_\_\_\_\_ What state: \_\_\_\_\_

Were you a member last year? \_\_\_\_\_ YES \_\_\_\_\_ NO

Where \_\_\_\_\_

Are you currently receiving KPERS Retirement? \_\_\_\_\_ YES \_\_\_\_\_ NO

**Please circle your choice in each column.**

<u>Ethnic Group*</u>	<u>Gender</u>	<u>Position</u>	<u>Payment Method</u>
American Indian/Alaska Native	Female	Administrator <small>Effectively hires and dismisses, evaluates, transfers or disciplines.</small>	Check/Payment in full
Asian	Male	Classified Support Personnel	Payroll deduction
Black		Teacher Subject: _____	LEFT (Local Electronic Funds Transfer)
Caucasian		Other: _____	
Hispanic			
Multi-Ethnic			
Native Hawaiian/Pacific Islander			
Other			

\* Ethnic minority information is optional and failure to provide it will in no way affect your membership status, rights or benefits. This information will be kept confidential.

**Membership Type: Please mark appropriate box and write the dues amount in the dues box.**

**Professional:** K-12 teachers, school administrators and substitutes with a teaching certificate who work for a public educational institution; and higher education facility.

	<u>NEA Dues</u>	<u>KNEA Dues</u>
<input type="checkbox"/> Full time (more than 50%)	\$166.00	\$362.00
<input type="checkbox"/> Half time (26% to 50%)	\$88.00	\$181.00
<input type="checkbox"/> Quarter time (25% or less)	\$49.25	\$91.50
<input type="checkbox"/> Substitute not under contract (liability only)	\$15.00	\$55.00

**Educational Support Professional (ESP):** custodians, bus drivers, para-educators, secretaries, cooks and other support personnel who work for a public educational institution; and higher educational support staff.

	<u>NEA Dues</u>	<u>KNEA Dues</u>
<input type="checkbox"/> ESP - Full time (more than 50%)	\$96.50	\$181.00
<input type="checkbox"/> ESP - Half time (26% to 50%)	\$53.50	\$90.50
<input type="checkbox"/> ESP - Quarter time (25% or less)	\$32.00	\$45.75

<b>DUES</b>	
NEA	\$ _____
KNEA	\$ _____
Local	\$ _____
State and Local PAC	\$ <u>16.00</u>
<b>TOTAL</b>	\$ _____

Note: Dues payments and contributions or gifts to KPAC and local PAC 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 hereby authorize the Board of Education to deduct from my salary my professional dues, assessments and voluntary contribution to KPAC, as these sums are established or suggested annually to the local NEA-affiliated teachers association, as indicated above, and to forward such amounts to that local association. This authorization is to continue in force unless revoked by me for a succeeding membership year by giving written notice to that effect to my local association on or before August 10. I understand that if my employment is terminated prior to the deduction of the amounts authorized herein, the unpaid portion of dues, assessments and KPAC will be deducted from my final check.

I understand that of the total NEA dues, \$5.65 is for a subscription to NEA TODAY, \$5.60 is for the higher education publications, \$3.40 is for the retired publication and \$3.40 is for the student publication for one year. Of the KNEA dues, \$2.50 is for KNEA Issues. The publication(s) received by members are based on membership category.

\*The PAC contribution will be shared with local and state political action committees for them to support candidates for state and local office. Only U.S. citizens or lawful permanent residents may contribute to the NEA Fund. A member may request and obtain a refund for a state PAC contribution by completing a form available from his or her local association or UniServ office. Whether a member contributes to PAC or not will not affect his or her membership status, rights, or benefits in NEA, Kansas NEA, or any of their affiliates.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Membership in NEA, KNEA and Local Association is required.**

**After completing this application, the original signed copy should be sent to the UniServ office ; a scan or photocopy should be provided to the local association and for personal records.**