



59618

Membership: Enrollment  Transfer  Agency Fee Changing to Member

Membership Year

2017 - 2018



Great Public Schools for Every Student



Illinois Education Association PLEASE PRINT USING UPPER CASE ONLY - USE BLACK OR BLUE INK ONLY

Social Security# 123-12-1234 Gender M  F  Birthdate

First Name JANE MI T Last Name DOE Name Suffix

Address 123 MAIN STREET

City PACATINE

State IL Zip 60067 Home Phone 847-555-5555 Mobile Phone Preferred Phone Home  Mobile

Home Email JANE@INTERNET.COM Payment Method Payroll Ded  Check

Work Email

Table with columns: Ethnicity (3), Registered Voter, Membership Category, Association, Dues/Contributions. Includes rows for NEA Dues, IEA-NEA Dues (1), NEA FCPE (2) \$10 Suggested, Local Dues, and TOTAL.

Membership is open only to those who agree to subscribe to the goals and objectives of the Association and to abide by its Constitution and Bylaws.

Local Name, Billable Party ID, Position\*, Subject\*, Employee ID, Employer Name, Employer ID, Building/Work Site, Building ID

(1) IPACE STATEMENT: Contributions to IPACE of \$30.00 may be used to support candidates for local or state office. A different amount may be established annually by IEA. These contributions are voluntary and not required as a condition of membership in any organization.

(2) NEA FCPE STATEMENT: The National Education Association Fund for Children and Public Education (NEA FCPE) collects voluntary contributions from Association members and uses these contributions for political purposes, including, but not limited to, making contributions to and expenditures on behalf of friends of education who are candidates for federal office.

(3) ETHNIC STATEMENT: This information is optional and a failure to answer it will in no way affect your membership status, rights, or benefits in NEA, IEA-NEA, or any of their affiliates. The information will be kept confidential.

MEMBERSHIP STATEMENT: "I hereby agree that my unified membership in IEA-NEA and local Association shall be continuous unless I notify the President of my local Association or the President of the Illinois Education Association-NEA, in writing, between July 15 and September 15 in any calendar year."

I hereby authorize my employer to deduct from my salary my professional dues and voluntary contribution to IPACE, as these sums are annually established, and my voluntary contribution to NEA FCPE 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 September 15. I understand that if my employment is terminated prior to the deduction of the amounts authorized herein, the unpaid portion of dues and IPACE and NEA FCPE contributions will be deducted from my final check.

"Dues payments and contributions or gifts to NEA FCPE and IPACE are not deductible as charitable contributions for federal income tax purposes. Dues payments may be deductible as a miscellaneous itemized deduction."

Member Signature Jane T DOE Date 9/15/17

Association Representative Signature Date

Revised June 2015

IEA COPY

