

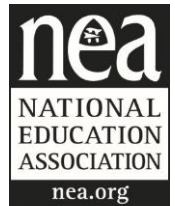


JOIN TODAY

TO HAVE A COLLECTIVE VOICE FOR QUALITY PUBLIC EDUCATION

PEA / CEA / NEA MEMBERSHIP FORM

September 1, 2020 - August 31, 2021



Great Public Schools for Every Student

PRINT, USE PEN

Last 4 of Social Security # _____ (this is CONFIDENTIAL / not sold or used outside of CEA/NEA/PEA)

Local Association: Poudre Education Association School/Worksite: _____

First Name _____ MI _____ Last Name _____

Mailing Address _____ City _____ Zip Code: _____

Cell Phone _____ Home Phone _____ Date of Birth: ____ / ____ / ____

*Home Email _____ PSD Email _____ @psdschools.org

Ethnicity: _____ Gender: _____ *US Citizen: Yes No (see #4 on reverse side)

Registered Voter? Yes No Political Affiliation: Republican Democrat Independent Other

I have been teaching # of years _____ Previous Union Involvement Includes: _____

MEMBERSHIP TYPE:		<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time — Contract %: _____
<input type="checkbox"/> Active K-12 Teacher or College Faculty and Transitional Retiree	<input type="checkbox"/> Active Education Support Professional (ESP)	<input type="checkbox"/> Substitute	<input type="checkbox"/> Principal / Assistant Principal
		<input type="checkbox"/> Other: _____	
POSITION: _____		SUBJECT: _____	

Check here for CEA First-Year Reduced Dues (This is the first year you have ever been employed by any public school district in the US.)

PAYMENT METHOD Payroll Deduction Electronic Funds Transfer (EFT) Check/Credit Card
[Additional Form Required] [Additional Form Required]

* I have reviewed this form in its entirety (including the reverse side) and hereby authorize the continuing payment or dues deduction of unified dues (PEA, CEA, NEA) unless I revoke this authorization in writing to my local association in accordance with PEA's Bylaws. I also authorize modifications of the associations' dues. (see #1 on reverse side)

*(Required) MEMBER SIGNATURE _____ DATE (required) _____

*(Required) PEA REPRESENTATIVE NAME: _____



The Poudre Education Association
Creates Working Environments
Where Teachers Thrive & Students Succeed!

Annual Dues (prorated if member less than 100% FTE)	
NEA	\$ _____
CEA	\$ _____
Local	\$ _____
Total	\$ _____
Monthly	\$ _____

*Extremely Important / Required

COLORADO EDUCATION ASSOCIATION
MEMBERSHIP FORM
SEPTEMBER 1, 2020—AUGUST 31, 2021

1. Cancellation of Membership: The United Education Profession (NEA-CEA-PEA) membership year runs from September 1 to August 31. Any member who has authorized payroll deduction for membership dues, and who desires to revoke said authorization, shall do so in writing through the Association prior to September 30 of that membership year. Any exceptions to this procedure shall be only with Executive Board approval. The Executive Board will base their decision on information provided them.

I understand my membership is voluntary. I fully understand that the annual association dues, fees, and assessments required for membership in the three associations are subject to periodic change by the governing bodies of the associations and authorize on a continuing basis the payment of the modified dues.

2. I understand that I must maintain active and continuous membership to continue to receive membership benefits, legal services, and any other NEA or CEA products.
3. By providing my cell phone number, I understand and agree that CEA / NEA / NEAMB may use automated calling, prerecorded calls, and/or text me on a periodic basis. The three affiliates will never charge for text message alerts. Carrier message/data rates may apply. I understand that I can revoke my consent at any time.
4. The CEA Active full-time membership dues for teachers, building principals, and college faculty includes \$41 Every Member Option (EMO) for political activities and \$15 Public Relations Assessment for CEA's advertising campaign. The CEA Active full-time membership dues for Education Support Professionals includes \$20.50 EMO and \$7.50 PR Assessment. EMO and the PR Assessment are pro-rated for part-time members.

The CEA will refund the EMO by check if the member notifies CEA in writing before December 15 by U.S. mail or email at the CEA website, coloradoea.org. CEA notifies all Active members who join after Dec 15 about EMO. Retired, Student, and Reserve members do not pay EMO or the PR Assessment, though they may make contributions to either or both. There is EMO refund information at coloradoea.org. Providing U.S. Citizen Information is voluntary, it is collected in order to refund Every Member Option contributions to non-U.S. citizen members in accordance with Colorado law.

Ethnicity information is optional.

5. If you work half-time or less, you will pay half dues. This is determined by your employment contract and by the threshold of 1,440 hours for Educational Support Professionals. A member who works 25% or less of full-time is eligible to pay a quarter of NEA dues. If an Active member joins after September 1, the local association must prorate the dues by the number of months remaining in the membership year. Retired and Student memberships are not prorated.
6. Dues payments are not deductible as charitable contributions for federal income tax purposes, but (a portion) may be deductible as a miscellaneous itemized deduction.
7. All information is confidential. CEA does not sell or give away member lists. Membership is open only to public education employees and students in pre-teaching programs at any public or private college/university.