



2010-2011 Membership Enrollment Form

United Teachers of Wichita

150 S Ida - Wichita, KS 67211-1504



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

Name _____ Local Association _____

Social Security # _____ Employer (USD) _____

Address _____ Building Name _____

City _____ State _____ Zip _____

Phone H: _____ W: _____

Home Email: _____

Work Email: _____

Are you currently receiving KPERS Retirement? ___ YES ___ NO
 Is this your first year teaching? ___ YES ___ NO
 Were you a student member last year? ___ YES ___ NO
 For how many years? _____ What state: _____

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>	Payroll deduction
Asian	Male	Classified Support Personnel	
Black		Teacher Subject: _____	
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.

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

- Full time
 Half time

Full time is position count 0.61 or more
 Half time is position count 0.60 or less

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.

DUES	
NEA/AFT	\$ <u>16.55</u>
KNEA/KAPE	\$ <u>30.16</u>
UTW/ LABOR FED	\$ <u>8.25</u>
State and Local PAC	\$ <u>1.34</u>
TOTAL	\$ <u>56.30</u>

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, \$5.40 is for a subscription to NEA TODAY, \$19.75 is for the higher education publications, \$3.25 is for the retired publication and \$3.25 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.

Signature _____

Date _____

Membership in NEA, KNEA and Local Association is required.

After completing this application, the original signed copy should be sent to United Teachers of Wichita; a scan or photocopy should be provided for personal records.