



NEW MEMBERSHIP ENROLLMENT

Membership Year _____ New Member Transfer Fee Payer to Member



Great Public Schools for Every Child

PLEASE PRINT USING UPPER CASE ONLY — USE BLACK OR BLUE INK ONLY

Last 4 digits of your Social Security Number xxx-xx Membership Number 000
(refer to your IEA membership card)

First name _____

Middle name _____

Last name _____

Former name _____

Home address _____

City _____

State _____ Zip _____

Preferred phone _____ - _____ - _____ Date of birth ____/____/____

Phone type (check one) Cell Home Work Ethnicity (Optional) _____ Gender identification _____

American Indian/Alaska Native (1), Black (3), Hispanic (4), Caucasian (not of Spanish Origin) (5), Asian (6), Native Hawaiian/Pacific Islander (7), Multi-Ethnic (8), Other (9), Unknown (UK)

Personal email _____

Work email (enter 0 for zero) _____

Preferred email (check one) Personal Work

Employer _____

Worksite (work location name) _____

Position _____ Subject _____

Please identify your first year employed in education _____ Employment start date (in this local) ____/____/____

By providing my phone number, I understand that the Illinois Education Association-NEA (IEA-NEA), National Education Association (NEA) and their affiliates, including the local association, may use automated calling techniques and/or text message me on my cellular phone on a periodic basis. I understand I can unsubscribe from receiving such messages by contacting IEAConnect at 1-844-432-1800. The IEA-NEA, NEA and my local association will never charge for text message alerts. Carrier message and data rates may apply to such alerts.

I agree to my unified membership in the IEA-NEA, NEA and my local association (including any other association which is my exclusive bargaining representative and affiliated with the IEA-NEA) ("Association") and that my membership shall be continuous unless I provide written notice signed by me stating that I no longer want to be a member. Such notice shall also include the name of my local association and be sent via U.S. mail to either the IEA President or my local association president at the following address: 100 East Edwards St., Springfield, Illinois 62704.

I agree to submit dues to the Association and hereby authorize my employer (including any other employer to which my employment is transferred by law or agreement) to deduct from my pay such dues and voluntary contributions to IPACE, as these sums are annually established, and to NEA FCPE, and to forward such amounts to my local association (or IEA-NEA, if the local association is no longer affiliated with IEA-NEA). This authorization is to continue in force, regardless of my membership status, unless a) revoked by me for a succeeding membership year by giving written notice to that effect to both my employer and local association on or before September 15 or b) my employment ends.

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

The invalidity or unenforceability of any particular provision shall not affect the validity and enforceability of other provisions in this Agreement.

Member Signature

_____/_____/_____
Date

Association Representative Signature

_____/_____/_____
Date

LOCAL NAME & BILLABLE PARTY ID

Membership Category
AC-1-100 Active Professional FT
AC-1-50 Active Professional PT
AC-1-25 Active Professional QT
AC-2-100 Active ESP FT
AC-2-50 Active ESP PT
AC-2-25 Active ESP QT

Payment Method

Payroll Deduction Check

Association	Dues/Contributions
NEA Dues	_____ . _____
IEA-NEA Dues (1) <small>(see back)</small>	_____ . _____
NEA FCPE (2) <small>(see back)</small>	_____ . _____
Local Dues	_____ . _____
TOTAL	_____ . _____

Our Association provides resources and support to educators to ensure student success. How can we help you in your career and practice as an educator?

- Student Behavior/Classroom Management
- Curriculum Assistance
- Access to Mentors and/or Coaches
- Working with Parents
- Working with Administrators
- Understanding your Evaluation/Observation Process

Our Association works to ensure every school provides our students with the opportunities to succeed. Which of the following issues are most important to you?

- Social and Racial Justice
- Economic Justice
- Parental and Community Engagement
- Fully-Funded Schools
- Conditions in the Workplace
- Education Policy (policy that impacts your school at the local, state or national level)
- Political Advocacy (advocate for policies that ensure all students get the opportunities they deserve)

Our Association advocates for conditions that retain high-quality educators for students. Which of these are you interested in learning about?

- Compensation and Contracts
- Educator Rights and Responsibilities
- Health Care and Insurance
- Pension and Retirement Benefits
- Student Debt and/or Finances
- Stretching Your Paycheck

- (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 employment or membership in any organization. A refund of this amount may be obtained if written notification is given by the member to IPACE, 100 E. Edwards St., Springfield, Illinois 62704, prior to December 31st of the current school year. IPACE refund request forms can be obtained from the IEA Government Relations Department.

- (2) **NEA FCPE STATEMENT:** 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 friend 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. Contributions to the NEA Fund are not deductible as charitable contributions for federal income tax purposes. Federal law requires us to use our best efforts to collect and report the name, mailing address, occupation, and name of employer for each individual whose contributions aggregate in excess of \$200 in a calendar year.