

ARIZONA EDUCATION ASSOCIATION
EARLY ENROLLMENT FORM (April 1 - May 31, 2021)
CHANDLER EA



Name: _____

Address: _____ **SSN (last 4 only):** XXX-XX-_____

Apt #: _____ **Work Location:** _____

City State Zip: _____ **Gender:** _____

Home Phone: _____ **Ethnicity:** _____

Mobile Phone: _____ **Birth Date:** _____

Home Email: _____ **Registered Voter?** Yes No

Work Email: _____ Democrat Republican Independent None

Certified Full Time Part Time # Hours Per Week: _____ Subject: _____

Position: _____

	2021-22		2020-21	
	# of Deductions	Certified Amount*	# of Deductions	Certified Amount*
PAYROLL DEDUCTION	TBD	TBD	20	\$32.25

***Deduction amounts are based on full time employment and are valid through May 31, 2021. Amounts may vary based on date signed, employment status and/or prior membership status, and/or any changes in AEA/NEA and/or LEA dues.**

As a participant in the Arizona Education Association/National Education Association Early Enrollment Membership Incentive Plan, I am eligible to receive—prior to September 1, 2021, but in no event before April 1, 2021—benefits under the NEA Educators Employment Liability (EEL) Program, as well as access to select NEA and AEA Member Benefits programs. As a condition of eligibility for these benefits, I agree to pay the appropriate unified Active membership dues for the 2021-22 membership year in accordance with established payment procedures. The dues listed above are subject to periodic change by the governing bodies of the NEA, AEA, and LEA for the 2021-22 membership year. Should I fail to do so, my eligibility to receive benefits under the NEA EEL Program shall immediately terminate. In addition, I shall become liable for the cost of any benefits that were provided to me under the NEA EEL Program and AEA member benefits prior to September 1, 2021.

EVERY MEMBER OPTION (EMO): AEA annual dues include an EMO assessment in the amount of \$24 for all active members working one-half time or more, which shall be distributed as follows: \$5 for AEA Foundation for Teaching and Learning (Foundation), \$4 for AEA Fund for Public Education (AEA Fund), and \$15 for the AEA Education Improvement and Defense Fund (AEA EIDF). Active members working less than one-half time shall have an EMO of \$12, distributed as follows: \$2.50 for AEA Foundation, \$2 for AEA Fund, and \$7.50 for the AEA EIDF. Since 1997, the AEA Foundation has supported teaching and learning in Arizona through over \$950,000 in student scholarships, professional development, opportunities and grants for innovative classroom projects. The AEA Fund and the AEA EIDF collect voluntary contributions from Association members and their immediate family members who are U.S. citizens or lawful permanent residents for political purposes, including, but not limited to, supporting legislative initiatives and propositions that further the improvement of education in Arizona and making expenditures to and on behalf of friends of public education who are candidates for state office. All contributions to the AEA Fund and the AEA EIDF are voluntary and not a condition of employment nor membership in the Association, and members have the right to refuse to contribute without suffering any reprisal. Members desiring a refund from EMO may request a Refund Request Form by calling 800-352-5411. The member must mail the Refund Request Form to Membership postmarked or hand-delivered within thirty (30) days of signing this enrollment form. The Arizona Education Association will mail a refund check after October of the membership year you are joining.

By providing my phone number, I understand that the National Education Association (NEA) and its affiliates including Arizona Education Association (AEA), the local association (LEA), NEA Member Benefits, and NEA360 may use automated calling techniques and/or text message me on my cellular phone on a periodic basis. The NEA, AEA, and LEA will never charge for text message alerts. Carrier message and data rates may apply to such alerts. Text STOP to 787753 to stop receiving messages. Text HELP to 787753 for more information.

By signing this form, I agree to become a member of the local association (LEA), the Arizona Education Association (AEA), and the National Education Association (NEA). I hereby request and voluntarily accept membership in these associations and agree to abide by the Constitution and Bylaws of all three associations. I hereby agree to pay the annual dues, fees, and assessments established by the three associations in consideration for the services the union provides. I understand those annual amounts are subject to periodic change by the governing bodies of the associations. I authorize on a continuing basis, and regardless of my membership status, the payment of those annual amounts established by the three associations through any payment method accepted by AEA unless and until I revoke this authorization in a signed writing sent to AEA, with such revocation being effective upon thirty (30) days' written notice. I understand that by signing this membership form, I am confirming my understanding and agreement to the above.

Signature: _____ Date: _____

Must be dated between April 1 and May 31, 2021

Recruited By (please print name): _____

602-264-1774 | 800-352-5411 | 345 E Palm Lane, Phoenix, AZ 85004-1532 | www.arizonaea.org

Please return this membership form via scan and email to Maria Arvizu at Maria.Arvizu@ArizonaEA.org immediately.