



# ACTIVE EA/SCSP MEMBERSHIP FORM

## Saint Paul Federation of Educators, Local 28

23 Empire Drive, St. Paul, MN 55103 - Phone: 651-222-7303 - Fax: 651-222-8948

An affiliate of Education Minnesota, the American Federation of Teachers, the National Education Association and AFL-CIO

Recognizing the Saint Paul Federation of Educators, American Federation of Teachers, the National Education Association, Education Minnesota, and the AFL-CIO as constructive forces in providing better educational facilities for children and in protecting the rights to which educators are entitled to in a democratic society, I hereby apply for membership in Local #28, Saint Paul Federation of Educators, an affiliate of EM, AFT, NEA and AFL-CIO.

First Name		Middle Name		Last Name	
Preferred Name ( <i>Help us know what name you like to use.</i> )			Former Name		
Home Address		City		State	Zip
Phone (      )			Personal Email		
Date of Birth			Work Email		
Ethnicity—Optional ( <i>Help us connect you to a racial affinity group.</i> )			Preferred Pronouns—Optional ( <i>Help us call you by your preferred pronoun.</i> ) ___ She/Her/Hers    ___ He/Him/His    ___ They/Them/Theirs		
Last 4 digits of your Social Security Number ( <i>This helps us identify you if you have the same name as another member.</i> )			Employee Number ( <i>Feel free to leave blank if you don't have one yet.</i> )		
School Building			Position		
License Area(s)			Employment Start Date		FTE ( <i>Full Time = 1.0</i> ) ___1.0 ___0.9 ___0.8 ___0.7 ___0.6 ___0.5 ___ < 0.5

**Please initial each box and sign your name and date below.**

- I hereby apply for membership in: Saint Paul Federation of Educators; St. Paul Regional Labor Federation (SPRLF); Education Minnesota; and the national AFT and NEA. I understand my membership is continuous as long as I remain actively employed. I understand that this agreement is voluntary and not a condition of employment and that I have the legal right to refuse to sign this agreement without suffering any reprisal.
- I authorize my employer to deduct and remit to my local from my pay in each pay period a pro-rata portion of the annual dues, fees and assessments required for membership in SPFE, Local 28 (.0125 percent of the current annual total gross salary), Education Minnesota, and the National Education Association and American Federation of Teachers. I fully understand that the annual dues required for membership in the four associations are subject to periodic change by the governing bodies of the associations and authorize my local to deduct any modified monthly dues, fees and assessments established by those governing bodies unless my obligation to do so ends under one of the circumstances set forth below. This authorization continues from year-to-year, regardless of my membership in the union, unless: (a) I revoke it by submitting written notice to the local union during the thirty-day period that begins on Sept. 1 and ends on Sept. 30, in which case my revocation will take effect on Oct. 1 in the year in which I submit the notice; or (b) my employment with Saint Paul Public Schools ends. If any provision of this agreement is determined to be unlawful or invalid, the remaining provisions will remain in effect.
- By providing my phone number, I understand and agree that SPFE, Education Minnesota and its affiliates may use automated calling technologies and/or text message me on my cellular phone approximately 4-5 times per month. Education Minnesota and its affiliates will never charge for text message alerts. Carrier message and data rates may apply to such alerts. Text STOP to 877877 to stop receiving messages.
- I UNDERSTAND THAT THIS AGREEMENT IS VOLUNTARY AND IS NOT A CONDITION OF EMPLOYMENT AND THAT I HAVE THE LEGAL RIGHT TO REFUSE TO SIGN THIS AGREEMENT WITHOUT SUFFERING ANY REPRISAL.
- I UNDERSTAND THAT INITIALING A BOX CONSTITUTES A LEGAL SIGNATURE CONFIRMING MY UNDERSTANDING AND AGREEMENT TO THE ABOVE.

### Saint Paul Federation of Educators, Local 28 AFT/COPE (Political) Fund

**I authorize my employer to deduct from my wages the following sum per month as a voluntary contribution to the SPFE AFT/COPE Fund:**

\_\_\_ \$5    \_\_\_ \$10    \_\_\_ \$15    \_\_\_ \$20    \_\_\_ Other: \$ \_\_\_

AFT/COPE collects voluntary contributions from members and uses those contributions for political purposes, including, but not limited to, making contributions to and expenditures on behalf of friends of public education who are candidates for federal office. Only U.S. citizens or lawful permanent residents may contribute to AFT/COPE. Contributions to AFT/COPE 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. A member may contribute more or less than the suggested amount, or may contribute nothing at all, without it affecting his or her membership status, rights or benefits in AFT or any of its affiliates. Contributions or gifts to AFT/COPE 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 contribution is aggregate in excess of \$200 in a calendar year. This voluntary authorization may be revoked at any time by notifying the Saint Paul Federation of Educators in writing of the desire to do so. Federal law prohibits AFT/COPE from receiving donations from persons other than members of AFT and its affiliates, and their immediate families. All donations from persons other than members of AFT and its affiliates, and their immediate families, will be returned forthwith.

Signature

Date

**NEW MEMBER SIGNATURE:** *By signing this form, I agree to the terms above.*

**DATE**

**DUES:** Dues payments and contributions are not deductible as charitable contributions for federal income tax purposes. Ask your tax professional whether/how your dues payments might be otherwise reportable.

**POLITICAL ACTION COMMITTEE (PAC):** Your dues include \$25 per year for the Education Minnesota PAC. The PAC uses these contributions to fund political action efforts to strengthen the collective voice of educators in public policy-making.

**FOUNDATION FOR EXCELLENCE IN TEACHING & LEARNING:** Your dues include \$5 per year towards the Education Minnesota Foundation. The foundation uses these contributions to fund member grants as well as workshops that support and promote access to learning and excellence in teaching.

**REFUND PROCEDURE:** Members desiring a refund from either the PAC or the foundation must mail, email, or hand deliver a signed original refund request form specifying the member's refund request within 30 days of submitting this membership application form. Members can request the form by calling 800-652-9072.