



2012-2013 MNEA ENROLLMENT FORM

FEBRUARY PRO RATED

MNPS		MNPS EMPLOYEE ID NUMBER		SCHOOL/WORK LOCATION		ACCESS CARD ID/MEMBERSHIP NUMBER		
0000213618						000		
TITLE: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr.				GENDER: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		ASSOCIATION	MEMBERSHIP CODE	ANNUAL AMOUNT
NAME	LAST	FIRST	MIDDLE	NEA DUES	AC-1-100	180.00		
MAILING ADDRESS				TEA DUES	AC-1-100	150.50		
				MNEA DUES	AC-1-100	116.58		
CITY				NEA FCPE**		**4.00		
STATE			ZIP CODE	MNEA-PACE				
PERSONAL HOME E-MAIL ADDRESS (not MNPS)						TOTAL	*451.08	

SOCIAL SECURITY NUMBER								
				-				

(AREA CODE) CELL PHONE								
				-				

POSITION CODE			

SUBJECT CODE			

SEE CODES BELOW

SEE CODES BELOW

DATE OF BIRTH		
MONTH	DAY	YEAR

(AREA CODE) HOME PHONE								
				-				

ETHNICITY CODE	

SEE CODES BELOW

CONTINUING MEMBERSHIP PROVISION:

By signing below, I agree to remain a member of MNEA. I may cancel my membership for a subsequent year by sending a signed and dated written request to MNEA prior to June 1. I agree that only an original signature is accepted—not facsimiles or emails.

*Each year, deductions will be adjusted to reflect current annual membership dues.

Are you a first year teacher? YES NO Were you a student member last year? YES NO
 Have you ever been a member of NEA? YES NO If so, when and what local? _____

****METHOD OF PAYMENT:** PAYROLL DEDUCTION: 14 equal installments unless fewer than 14 pay periods remain in the school year
 BANK DRAFT: 16 semi-monthly bank drafts in equal installments on the 2nd and 16th of each month starting in September unless fewer than 16 deductions remain through June 2

I hereby authorize the Metropolitan Nashville Board of Public Education to deduct from my paycheck annual dues for the United Education Profession and political action contributions as indicated. My membership authorization will continue until revoked in writing to the president of MNEA in accordance with the continuing member provision noted above. I agree to hold the Metropolitan Nashville Board of Public Education harmless for these deductions. *The MNEA Constitution and Bylaws* will prevail over any conflicting provision of this form.

**The National Education Association Fund for Children and Public Education (NEA Fund) collects voluntary contributions from Association members and uses these 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. The local and state association political action committee performs similarly with local and state elections. Contributions to The NEA Fund for Children and Public Education and state and local PACE 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. Although The NEA Fund for Children and Public Education requests an annual contribution of \$15, this is only a suggestion. 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 NEA or any of its affiliates.

0.0382 of TEA dues and .025 of MNEA dues support Government Relations activities. The funds used for political support are not tax deductible and will be used for other purposes upon written request. Dues payments and contributions or gifts to The NEA Fund for Children and Public Education, or to TEA Fund and MNEA-PACE are not deductible as charitable contributions for federal income tax purposes. However, dues payments (or a portion) may be deductible as a miscellaneous itemized deduction. 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.

Federal law prohibits The NEA Fund from receiving donations from persons other than members of NEA and its affiliates, and their immediate families. All donations from persons other than members of NEA and its affiliates, and their immediate families, will be returned forthwith.

MEMBER'S SIGNATURE _____

DATE _____

MNEA REPRESENTATIVE _____

CODES: The following information is represented in the form of codes. Please indicate in the appropriate area on the enrollment form the code which is applicable for you.

Position	Code	Subject	Code	Subject	Code	Ethnicity	Code
Administrator	ADMN	Adult Basic Ed	ADED	Science	PHSC	American Indian/Alaska Native	1
Adult Educator	ADED	Agriculture and Natural Resources	AGNR	Reading	READ	Black	3
Classroom Teacher	CLTR	Art	ARTS	Social Studies	SSSS	Hispanic	4
Coach	COCH	Business Education	BSED	Special/Developmental Education	SDED	Caucasian (not of Spanish origin)	5
Counselor	CNSL	Career Technical Education	VTED	Speech and Drama	SPDR	Asian	6
Educational Assistant	SEST	Coaching	COCH	Vocational and Technical Education	VTEd	Native Hawaiian/Pacific Islander	7
Librarian/Media Specialist	LIBR	Computer and Information Technology	CICS	No Subject Tau**	NONE	Multi-Ethnic	8
Literacy Coach	LITC	Elementary School General Subjects	CSUB			Other	9
No Position Held	NONE	English/Language Arts	ELAR			Unknown	UK
Principal/Assist Principal	PRIN	Foreign Language and Literature	FLU				
Psychologist	PSCH	Health and Physical Education	HEPE				
Reading Specialist	READ	Family and Consumer Sciences	HOME				
Social Worker	SCWK	Industrial Arts	INAR				
Speech/Hearing Therapist	SHTH	Mathematics	MATH				
School Secretary	SEST	Middle School General Subjects	GSUB				
Supervisor	SPRV	Music	MUSI				





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BANK DRAFT AUTHORIZATION

I (we) hereby authorize the MNEA to initiate debit entries to my (our) checking account indicated below and the bank named below, hereinafter called BANK, to debit the same to such account. I (we) will not hold our BANK liable for any erroneous debits made by the MNEA.

Bank Transit No. _____ Account No. _____

This authorization is to remain in full force and effect until BANK has received written notification from me (or either of us) of its termination in such time and in such manner as to afford BANK a reasonable opportunity to act on it. A customer has the right to stop payment of a debit entry by notification to BANK prior to charging account. After account has been charged, a customer has the right to have the amount of the erroneous debit immediately credited to his/her account by BANK up to fifteen (15) days following issuance of statement of account or forty-five (45) days after the charge, whichever occurs first.

Name _____ Date _____

Signed _____ Signed _____

*Starting The 2nd or 16th of the month **Number of Semi-Monthly Payments 16

*Please note: The two monthly payments will be charged to your checking account on the 2nd and 16th of each month beginning September 16 or as soon as possible thereafter. In the event of a bank holiday or a weekend, the draft will be processed the next business day.

** If sixteen payments are not available, your payments will be prorated to end on June 2 or the next business day.

This agreement will remain in effect from year to year unless you instruct MNEA in writing that you want to terminate this method of paying association dues. Membership cancelations must be consistent with the continuing membership provision as stated on your membership form.

This authorization will not be accepted unless a voided personal check is attached.

[ATTACH VOIDED CHECK HERE]

JANE MEMBER
626 ELM STREET
NASHVILLE, TN 37201

476

Pay to the
Order of _____

----- 20 -----

\$ -----

VOID

----- DOLLARS

YOUR FIRST NATIONAL BANK
Nashville, Tennessee
Main Office YNC

FOR _____

⚡ 06400017 :
Bank Transit Number

⚡ 0054808674 : 0476
Account No.

MNEA COPY