

MEMBERSHIP APPLICATION



LEA PROFESSIONAL ASSOCIATION LOCAL 3954

Name:

Address:

Cell phone:

Personal (non-work) email:

professional unit paraprofessional unit

School:

MEMBERSHIP APPLICATION AND AUTHORIZATION FOR DUES DEDUCTION

I hereby request and accept membership in LEA Professional / Paraprofessional Association Local 3954 and I agree to abide by its Constitution and Bylaws. I authorize the union and its successor or assignee to act as my exclusive bargaining representative for purposes of collective bargaining with respect to wages, hours and other terms and conditions of employment with my employer.

Signature

____Date

Effective immediately, I hereby authorize and direct my Employer to deduct from my pay each pay period and transmit to LEA Professional / Paraprofessional Association Local 3954 membership dues in the amount established or revised by the LEA Professional / Paraprofessional Association Local 3954 in accordance with the Union's Constitution and ByLaws. There shall be no change in the amount of dues deducted without 60 days prior notice to me by LEA Professional / Paraprofessional Association Local 3954. If for any reason my Employer fails to make a deduction, I authorize the Employer to make such deduction in the subsequent payroll period.

I recognize that my authorization of dues deduction, and continuation of such authorization from one year to the next, is voluntary and not a condition of my employment. In order to comply with the Internal Revenue Service ruling, be advised that your membership dues are not deductible for federal income tax purposes. However, they may be deductible as ordinary and necessary business expenses.

Signature

____Date