

**EARLY ENROLLMENT PROGRAM
ENROLLING APRIL 1, 2017 - AUGUST 31, 2017**

For enrollees who are first-time Active Professional or Educational Support Professional members



1500 West Fourth Street
Little Rock, AR 72201-1064
Phone: (501) 375-4611
Toll Free: (800) 632-0624
www.aeaonline.org



FIRST	MIDDLE	LAST	TITLE
NAME			
ADDRESS			
CITY			
STATE	COUNTY	ZIP	

SOCIAL SECURITY NUMBER (LAST 4 DIGITS)	AREA CODE	HOME PHONE
HOME E-MAIL (NOT SCHOOL)	AREA CODE	WORK PHONE
FACEBOOK USER NAME	AREA CODE	CELL PHONE
TWITTER USER NAME	Receive Texts <input type="checkbox"/> Yes <input type="checkbox"/> No	

By providing my phone number, I understand that the National Education Association, NEA Member Benefits, NEA360, Arkansas Education Association, and my local affiliate may use automated calling techniques and/or text message me on my cellular phone on a periodic basis. Neither the National Education Association nor any of its affiliates charge for text message alerts. Carrier message and data rates may apply to such alerts. Text STOP to 84693 to stop receiving NEA messages. Text HELP to 84693 or go the nea.org/terms for more information.

SEE CODES ON BACK OF FORM

DATE OF BIRTH	GENDER	ETHNICITY
MO. DAY YR.		

POSITION	SUBJECT	POLITICAL PREFERENCE

Yes – I want to join my colleagues by becoming a member of my local association, the Arkansas Education Association, and the National Education Association. I hereby request and voluntarily accept membership in these associations, and agree to abide by the Constitution and Bylaws of all three associations.

Membership Annual Dues. I agree to pay the full annual dues for the professional unified membership for the Local Education Association, Arkansas Education Association and National Education Association for each school year that this agreement is in effect. Even though I may terminate my membership at any time I shall, nevertheless, remain obligated to pay the full annual dues for the school year in which I terminated my membership. I agree that my obligation to pay annual dues shall automatically renew each school year, unless I provide written notice of termination of my membership prior to September 1st. I agree that dues may be increased by some amount each year as determined by the Associations and I agree to pay those increased amounts. If I elect to pay dues in periodic installments through payroll deduction or electronic funds transfers (EFT) instead of one lump sum and if that method of payment is terminated, I agree to remit the full uncollected amount of annual dues to the Associations.

Continuing Payroll Deduction. I hereby request and authorize my employer, as provided by Ark. Code Ann. § 6-17-805, to deduct in regular installments this school year and each school year hereafter, the professional unified membership dues to the Local Education Association, Arkansas Education Association and National Education Association.

I further understand and agree that the dues may increase by some amount each year and I hereby authorize my employer to incorporate any such increase into the continuing deduction of my dues as may be directed by the organization's state, national or local affiliate.

I also authorize and direct my employer to attach this authorization form to my contract for this school year and for each school year hereafter for as long as my dues are deducted.

I agree that this authorization is binding for the entire school year and each subsequent school year and can only be withdrawn for a succeeding school year if I notify the school district and Associations in writing prior to September 1st of my choice to withdraw this authorization.

Dues payments are not deductible as charitable contributions for federal income tax purposes. Dues payments (or a portion) may be deductible as a miscellaneous itemized deduction.

EARLY ENROLLMENT MEMBERSHIP PROGRAM. As a participant in the _____ (local association), Arkansas Education Association, and National Education Association Early Enrollment Membership Program, I am eligible to receive prior to September 1, 2017 (but in no event before April 1, 2017) access to coverage under the NEA Educators Employment Liability (EEL) Program benefits, as well as access to select NEA Member Benefits Corporation programs. As a condition of eligibility for these benefits, I agree to pay the appropriate "unified" Active membership dues for the 2017-2018 membership year in accordance with the regular payment procedures. Should I fail to do so, my eligibility to receive benefits under the NEA EEL Program shall immediately terminate. In addition, I shall be liable for the cost of any benefits that were provided to me under the NEA EEL Program prior to September 1, 2017.

LOCAL ASSOCIATION

SCHOOL DISTRICT

WORK LOCATION

ASSOCIATION	MEMBERSHIP TYPE	CODE	ANNUAL AMOUNT
NEA	Prof. FT <input type="checkbox"/>	AC-1-100	
	ESP FT <input type="checkbox"/>	AC-2-100	
	Substitute <input type="checkbox"/>	SB-0-0	
	Other <input type="checkbox"/>		
AEA	Prof. FT <input type="checkbox"/>	AC-1-100	
	ESP FT <input type="checkbox"/>	AC-2-100	
	Substitute <input type="checkbox"/>	SB-0-0	
	Other <input type="checkbox"/>		
LOCAL DUES			
TOTAL			

AEA and NEA are unified. Membership is required in both organizations.

Method of Payment:

- Payroll Deduction Check Electronic Funds Transfer
Must include voided check.

WERE YOU A STUDENT OR ACTIVE MEMBER LAST YEAR?
 Yes No
(Former Student Members See Back of Form †)

See back for free insurance information.

NEW MEMBER'S SIGNATURE _____

DATE

RECRUITER'S PRINTED NAME _____
RECRUITER'S SIGNATURE _____

Upon enrollment each active professional and educational support member is automatically covered by American Fidelity for \$1,000 - \$5,000 AD&D plus \$1,000 to \$150,000 NEA Complimentary Life Insurance. Register your beneficiary for the NEA Complimentary Life Insurance at www.neamb.com/teachers-insurance or by calling **1-800-637-4636**.

The following information is represented in the form of codes. Please select the applicable code and write it in the space provided on the enrollment form.

POSITION CODES

Administrator***	ADMN
Adult Educator	ADED
Bookkeeper	BKPR
Bus Driver	BTVD
Bus Aide	TDOT
Classroom Teacher	CLTR
Coach	COCH
Counselor	CNSL
Building/Ground Maintenance/Repairs	CUST
Food Services	FSOT
Health and Student Services	HCOT
Librarian	LIBR
Literacy Coach	LITC
Maintenance Personnel	BGOT
Math Coach	INSP
Mechanic	MECH
Occupational Therapist	OCCT
Paraeducator (Instructional/Non-Instructional)	PPOT
Principal/Asst. Principal	PRIN
Psychological Examiner	PSYO
Secretary	SEST
Security	GPSW
Speech Therapist	SHTH
Supervisor	SPRV

ETHNIC CODES**

American Indian/Alaska Native	01
Black	03
Hispanic	04
Caucasian (not of Spanish Origin)	05
Asian	06
Native Hawaiian/Pacific Islander	07
Multi-Ethnic	08
Other	09
Unknown	UK

NEA MEMBERSHIP TYPES*

Active Professional FT	AC-1-100	\$189.00
Active Professional 26% - 50%	AC-1-50	\$106.00
Active Professional 25% or less	AC-1-25	\$ 64.75
Active ESP FT	AC-2-100	\$ 115.50
Active ESP 26% - 50%	AC-2-50	\$ 69.50
Active ESP 25% or less	AC-2-25	\$ 46.50
Substitute	SB-0-0	\$ 15.00

SUBJECT CODES

Art	ARTS
Business Ed	BSED
Coaching	COCH
Computer Science	CICS
Elementary (general subjects)	GSUB
English/Language Arts	ELAR
Foreign Language	FLLI
Gifted & Talented	GTAL
Health and Physical Education	HEPE
Home Economics	HOME
Mathematics	MATH
Music	MUSI
Physical Sciences	PHSC
Reading	READ
Social Studies	SSSS
Special Ed/Developmental Ed	SDED
Speech and Drama	SPDR
Vocational Education	VTED

POLITICAL PREFERENCE

Democrat	D
Republican	R
Independent	I

AEA MEMBERSHIP TYPES*

Active Professional FT	AC-1-100	\$359.00
Active Professional 50%	AC-1-50	\$179.50
Active ESProfessional FT	AC-2-100	\$155.00
Active ESProfessional 50%	AC-2-50	\$ 77.50
Substitute	SB-0-0	\$ 25.00

I hereby apply for membership in the AEA, NEA and LEA. I understand that of the total state dues \$1.00 is for an online subscription to the *Arkansas Educator* for one year. Membership is open only to those who agree to subscribe to the goals and objectives of the Association and to abide by its Constitution and Bylaws.

*Professional dues at each level will be set each year by the appropriate governing body.

**Ethnic and political information is optional and failure to provide it will in no way affect your membership status, rights or benefits in NEA, AEA or any of their affiliates. This information will be kept confidential.

***Directly hires, evaluates, transfers, disciplines or dismisses.

† Former members of Student-NEA are entitled to receive a rebate from NEA on their active membership dues in their first year of educational employment. Contact your local president or the AEA office by April 15, 2018 to receive a Student Rebate Application.