

MAINE EDUCATION ASSOCIATION

Affiliated with the National Education Association

HIGHER EDUCATION ENROLLMENT APPLICATION

ACSUM AFUM MPBCEA CCAA CCFA UMPSA

CAMPUS

BUILDING NAME

NAME	
ADDRESS	
ADDRESS 2	
CITY, STATE & ZIP	
HOME PHONE	
WORK PHONE	
E-MAIL ADDRESS	

For Office Use Only	
NEA	
MEA	
LOCAL	
TOTAL	

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SOCIAL SECURITY NUMBER
LAST FOUR DIGITS ARE REQUIRED

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DATE OF BIRTH

PAYROLL <input type="checkbox"/>	ETHNIC CODE <input type="checkbox"/>	GENDER <input type="checkbox"/>
FULL PAYMENT <input type="checkbox"/>		

- 1 - American Indian/Alaska Native
- 3 - Black
- 4 - Hispanic
- 5 - Caucasian (not Hispanic origin)
- 6 - Asian
- 8 - Multi-Ethnic
- 9 - Other

- F- Female
- M- Male

Per Pay Period Deduction Amount
\$ _____

<p>Authorization for Payroll Deduction of Dues</p> <p>I authorize continuous payroll deduction of association dues for as long as I remain a higher education employee in such amount as may be defined from time to time.</p>
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Dues payments are not deductible as charitable contributions for federal income tax purposes, but may be deductible as a miscellaneous itemized deduction.

Member's Signature

Date

Return Completed Form to: Membership – Higher Ed
1349 Broadway
Bangor, ME 04401
Email: ccrocker@mainea.org