

Membership Application

Submit your completed form by emailing a scanned copy to justin.katz@floridaea.org or by mailing a printed copy to the CTA office at 715 Spencer Drive, West Palm Beach, FL 33409.

Name:	Employee ID#:
Street Address:	City:ZIP:
Home Phone: ()	Cell Phone: () Work Phone: ()
Home E-mail Address:	
Work E-mail:	
☐ Full Time ☐ Half day / half time S	chool / Work Site:
Signature:	Date:
Recruiter:	Recruiter's School:
Current annual dues and assessments	are as follows: Local \$252.50, FEA \$228.56, NEA/AFT \$234.96, FL AFL-CIO \$6.00, and FL CLC \$3.60. Total dues and //ear: \$725.62 or \$32.98 over 22 pay period. (Half-day/half time) \$362.81 or \$16.49 over 22 pay periods.
described above and as certified by the As Association in accordance with payroll ded	nion dues for at-least three months, beginning in the 2019-2020 school year. I authorize my employer to deduct the dues and assessments ociation to the School Board with each year thereafter from my salary and direct and authorize my employer to pay such amounts to the actions in effect, provided, however I may cancel this authorization by providing written notice to CTA in keeping with provisions of my employer and CTA and the policies of CTA.
prescribed by the Association and certified	ssociation for at-least three months, beginning in the 2019-2020 school year, the dues and assessments described above and as may be to the School Board for each year thereafter. Under this method of payment, ¼ of the annual dues and assessments must be received by lance due no later than November 1 of any membership year.