

EP AFT NEW MEMBERSHIP RECORD El Paso American Federation of Teachers, AFT Local 3483, Texas AFT, AFT, AFL-CIO



1. YOUR INFORMATION (Please print clearly)

NAME:	DOB:	SS/	AN:
NON-EPISD EMAIL:		EPISD ID #:	
CELL PHONE:	CAMPUS NAME:	POSI	TION:
MAILING ADDRESS:		_ APT:	CITY:
STATE: ZIP:			
2. LET'S MAKE A DIFFERENC	E TOGETHER - JOIN TODAY		
Professional Dues: \$26.00	Paraprofessional Dues:	\$13.72	Support Dues: \$7.86
Members are encouraged to	•	on to the EP A	DWERFUL VOICE AFT COPE. Help us support pro- nange starts with you; let's make a
Make a twice monthly contr	ibution to EP AFT COPE (circle	e one): \$2.50	\$5.00 Other \$
SIGNATURE FOR COPE:	DATE (COPE AL	ITHORIZATION	l):
because I exercise this right. I und COPE may engage in joint fundrais time by notifying EP AFT in writing political campaigns. Contribution of	erstand this money will be used to n sing efforts with the AFT and AFL-CIC g of the desire to do so. Texas law pr	nake political co D. A voluntary CO ohibits EP AFT fr deductible as ch	and I will not be favored or disadvantaged antributions by EP AFT or AFT COPE. EP AFT OPE authorization may be revoked at any rom contributing general dues dollars to haritable contributions for federal income ity.
ACH BANK DRAFT PAY	MENT OPTION		
Bank Name		-	
Checking Account Number_	Rou	uting Number	r
the last working day of each change if authorized accord	month for the amounts indicing to the requirements of the	ated above. ⁻ e local, state,	draft my account on the 15 th and The monthly dues amount may or national constitutions. If this otified by the El Paso American

Fighting Forward Standing Together El Paso Al 2015

40 Years of **Fighting Back**

so AFT

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SIGNATURE:_____ DATE:_____

is given revoking this authorization.

Federation of Teachers/Texas AFT 60 days prior to change. I agree this authorization remains in effect

agreement. The dues/fees will be prorated as appropriate. These deductions will continue for this school year and future years, including any increase in dues/fees that may occur, and until written notification

until terminated in writing by me. I understand that withdrawals will continue until I cancel my

Your Federation Representatives

Andress, Irvin and Chapin **Feeder Patterns April Garcia c: 497-9747** agarcia@epaft.org **Coronado, El Paso and Franklin** Feeder Patterns Kara Cervantes c: 637-1395 karacervantes@epaft.org **Bowie, Burges and Jefferson** Feeder Patterns Stacye Naranjo c: 241-3427 stacyenaranjo@epaft.org **Austin Feeder Pattern and Central Office** Lupe Dominguez c: 783-7024 lupedominguez@epaft.org

Your routing and account numbers can be found on your check. Here is an example:

Your Address Your City, State, Zip	012
Pay To The Order Of	\$
	Dollars
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