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Affiliated with TSTA/NEA

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## 2021-2022 EARLY ENROLLMENT FORM

## YES, I WANT TO JOIN THE TEXAS FACULTY ASSOCIATION.

Name		Academic Field	or Program		
Mailing Address					
City			State		Zip
Institution		Location or car	npus		
Cell Phone		Home Phone			
Last 4 of SSN (for identification purposes	s only)	Personal e-mail	address		
MEMBERSHIP CATEGORIES (Check on	(P)				
□ First-Time Member Full-time Faculty or Professional Staff (\$425.00 □ Full-time Faculty or Professional Staff	D)	□ Full-time Classified Sta □ Part-time Faculty (\$303 □ Part-time Professional	3.00)	□Part-ti:	me Classified Staff (\$159.25)
PAYMENT OPTIONS (Please check one o	of the following cate	egories)			
Automatic Bank Draft: Monthly pa completed renewal form. Monthly YOUR ENROLLMENT FORM.	ayments will be d	educted from your chec	king account eacl ECK MARKED VO	n month fol DID MUST B	lowing the receipt of your E ATTACHED TO PROCESS
I authorize the Texas Faculty Assoc ment of my TFA membership. The upon timely written notice to TFA right to end this payment plan and	authorization wi and/or my design	ill remain in effect until nated financial institutio	revoked by me ir	writing. I h	have the right to stop payment
I authorize monthly basis in payment of my T	ΓFA membership.	[Bank, Savings & I also agree to the terms	Loan, or Credit Un s shown above.	ion) to pay a	nd charge my account on a
Check or Money Order (payable to Te	exas Faculty Associati	(on)			
Credit Card: □Master Card □V	•			Ex	p
Signature			Date		
Membership is open only to those who agree to sub Association/National Education Association Early E the NEA Educators Employment Liability (EEL) Prog unified Active membership dues for the 2021-2022 EEL Program shall immediately terminate. In additi-	nrollment Membership l gram, as well as access to membership year in acco on, I shall become liable	Incentive Plan, I am eligible to reconselect NEA Member Benefits Progordance with established payment for the cost of any benefits that w	eive – prior to Septembe rams. As a condition of e procedures. Should I fai	r 1, but in no eve eligibility for thes l to do so, my eli	ent before April 1, 2021 — benefits under se benefits, I agree to pay the appropriate gibility to receive benefits under the NEA
Dues payments are not deductible as charitable con  By providing my phone number, I understand that  Box of the and NEA260, may use automated calling to	the National Education	Association and its affiliates, inclu	iding the Texas State Tea	chers Association	t, the local association, NEA Member
Benefits and NEA360, may use automated calling te Association and the local association will never cha Employment Defense: In general, in order to be	rge for text message aler	ts. Carrier message and data rates	may apply to such alerts		
of the events or occurrences leading up to the action  I UNDERSTAND THAT THIS AGREEMENT IS THIS AGREEMENT WITHOUT SUFFERING AN	n complained about. Pre VOLUNTARY AND IS	existing conditions will not be po	ursued, except by discret	ion of TSTA.	
Demographic Data (optional and confidential)					
D American Indian/Alaska National DC	· ·				Transport des Mel
□ Black □ Asian	(not of Spanish Origin) vaiian/Pacific Islander	□ Unknown □ Multi-ethnic □ Other	□ Male □ Female □ Transg	ender Female	☐ Transgender Male ☐ Gender Expansive/Non-Conforming ☐ Other

Please remit to: MEMBERSHIP PROCESSING — TFA / 8716 N. Mopac Expressway / Austin TX 78759 (email: membershiprecords@tsta.org)
For more information: www.texasfacultyassociation.org