



2023-2024 MEMBERSHIP APPLICATION
Granite/Utah/National Education Associations

Please return this form to your Association Representative or send to:
GEA, 872 E Arrowhead Lane, Ste. 1, Murray, Utah 84107

Member #: _____

Form with fields for Social Security Number, District Employee Number, Hire Date, Birthdate, Legal Name, Local Association (Granite Education Association), Preferred Name, Gender, Address, City, State, ZIP, Cell Phone, Secondary Phone, Subject, Grade, Position, Race, Payroll Deduction, EFT, and Children At Risk Foundation. Includes checkboxes for New Hire, Past Aspiring Member, Intern, and Member.

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*Telephone Consumer Protection Act (TCPA) Consent - By providing my phone number, I understand that the National Education Association and its affiliates including the Utah Education Association, the Granite Education Association, NEA Member Benefits and NEA360 may use automated calling techniques and/or text message me on my cellular phone on a periodic basis.

- YES to Membership Commitment - I want to join with my fellow employees and become a member of the Granite Education Association and the Utah Education Association, and the National Education Association.
YES to Annual Payment Authorization - I hereby agree to pay the annual dues, fees, and assessments established by the three associations in consideration for the services the union provides.

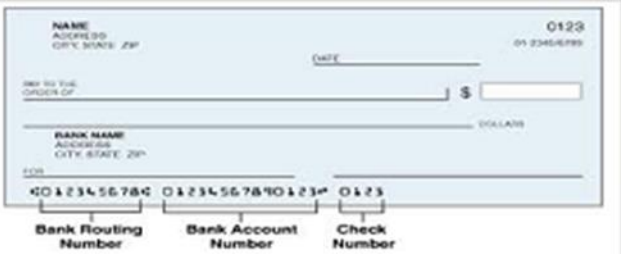
I UNDERSTAND THIS AGREEMENT IS VOLUNTARY AND IS NOT A CONDITION OF EMPLOYMENT AND THAT I HAVE THE LEGAL RIGHT TO REFUSE TO SIGN THIS AGREEMENT WITHOUT SUFFERING ANY REPRISAL.

MEMBER'S SIGNATURE and DATE fields

REFERRED BY field

-Please See Information on Reverse Side-

PACKET

EFT – ELECTRONIC FUNDS TRANSFER INFORMATION	
<p>Please attach a voided check for checking account. (No deposit slips)</p> <p>Name on Account: _____</p> <p>Billing Address: _____</p> <p>Bank Name: _____</p> <p>Account Type: ___ Checking ___ Savings</p> <p>Bank Routing # (9 digits): _____</p> <p>Bank Account #: _____</p> 	<p><i>I authorize the Utah Education Association (UEA) or its designated local to initiate credit or debit entries to my account with the financial institution named above. I authorize those payments to be made on a recurring basis, payable in monthly installment as set forth above.</i></p> <p><i>I understand that in the event one or more of the governing bodies of NEA or its affiliates authorizes a change in the amount of annual dues, fees and/or assessment, the UEA or GEA will notify me by email or home mailing address not less than (10) days in advance of processing any changes to the transactions amount as described in the payment summary. Following notice, I authorize the UEA or GEA to adjust the amount to be debited from my account to satisfy any modification by adjusting my payments equally over the payment schedule.</i></p> <p><i>I understand that this authorization for the payment of membership dues, fees and assessments continues year-to-year and shall remain in effect until the earlier of: 1) my written notice of termination, or 2) the termination of my eligibility to maintain membership in the Association. I understand that the rejection of any electronic funds transition of recurring credit card payment shall not constitute the termination of my membership in the NEA. I further understand that UEA or the local will notify me in writing if a transaction is rejected and I shall have seven (7) calendar days to provide updated debit account information, or with an accepted alternative method of payment, to continue my payments for annual dues, fees, and assessments.</i></p> <p>Signature: _____ Date: _____</p>

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

***Children At Risk Foundation (CARF) – CARF is a nonprofit foundation whose aim is to improve education, health and opportunities for at-risk students. A voluntary contribution to the Children at Risk Foundation of \$1.00 is suggested.

TELL US MORE

As an educator, you have a close-up view of the opportunities and challenges facing our schools. These questions will help us collectively win for our students and provide you with the tools you need to succeed as an educator.

1. What year did you enter the profession? (YYYY) _____

2. Your union provides training, support, and tools to ensure your success. What would you like to learn more about?

- Building relationships and meeting students' social-emotional needs
 Family and community engagement
 Instructional and classroom strategies
 Health and safety
 Social justice and racial equity
 Technology
 Reducing student debt
 Saving money with NEA Member Benefits

3. When we work together, we have a stronger voice. How would you like to participate in your union? (Mark all you are interested in)

- | | | |
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| <input type="checkbox"/> Membership, Leadership & Advocacy
Talking to colleagues about joining our union to build power for members. For example, participating as an organizer, building representative, or another Association leadership role. | <input type="checkbox"/> Collective Action
Helping get the word out about bargaining, meet & confer, or other workplace actions. | <input type="checkbox"/> Leading Our Professions
Supporting members to grow in their professional practices. |
| <input type="checkbox"/> Political Activism
Volunteering with my union to elect pro-public education candidates from both parties—from my local school board to the White House. | <input type="checkbox"/> School Funding & Education Policy
Working to increase education funding at my school, district, and state. | <input type="checkbox"/> Thinking About It...
I'm not ready to volunteer right now but I'm looking forward to staying informed. |