



MEMBERSHIP TRANSFER FORM

First Name: _____ Middle: _____ Last: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Last 4 SSN: _____

Cell Phone: _____ Personal Email (non-work): _____

INITIALS _____ By providing my phone number, I understand that the Georgia Association of Educators and its affiliates, including the NEA, may use automated calling techniques, prerecorded calls, and/or may text me on my phone on a periodic basis. The Georgia Association of Educators and its affiliates will never charge for text message alerts. Carrier message and data rates may apply to such alerts. Note — Individuals may revoke this consent at any time, and their revocation must be honored. Violations carry penalties enforced by FCC.

SCHOOL DISTRICT AND SCHOOL INFORMATION

School District: _____

Worksite: _____

Employee Id: _____

PAYMENT METHOD (Check preferred method)

- Cash/Check
- Credit Card
- EFT
- Payroll Deduction
- RCC

Credit Card Authorization or Recurring Credit/Debit Card Payment

Name (as it appears on card): _____

Payment (full payment only): \$ _____ Visa Mastercard Discover

Card Number: _____ Expiration Date: _____

Electronic Funds Transfer (charges are debited last business day of each month)

Bank Name: _____

Bank Routing Number: _____

Account Number: _____

Monthly Payment Amount \$ _____

GAE annual membership dues include the following refundable contributions:

- Georgia Association of Educators Foundation - \$2 for Active Certified members and \$1 for Active Education Support members. GAE Foundation contributions fund educational scholarships and grants to members and potential educators and are tax deductible as charitable contributions.
- Georgia Association of Educators-Fund for Public Education (GAE-FPE) - \$6 for Active Certified members and \$3 for Active Education Support members. GAE-FPE contributions are used for political purposes and are not tax deductible. GAE Foundation and GAE-FPE contributions are voluntary and members have the right to a refund of these contributions. Send your request for refund of GAE Foundation or GAE-FPE contributions in writing to GAE Membership Processing.
- NEA, GAE, and local association membership dues are not deductible as charitable contributions. Six percent (6%) of GAE membership dues is attributable to lobbying expenses and is not tax deductible.
- Membership Commitment: I want to join with my fellow employees and become a member of the local association if applicable, the Georgia Association of Educators, and the National Education Association.
- I hereby request and voluntarily accept membership in these associations and agree to abide by the Constitution and Bylaws of all three associations.
- By providing my cell phone number, I understand that the GAE and its affiliates, including the NEA, may use it for text message alerts. Carrier message and data rates may apply to such alerts.

NOTE - Individuals may revoke this consent at any time, and their revocation must be honored. Violations carry penalties enforced by FCC.

- Annual Payment Authorization: I hereby agree to pay the annual dues, fees, and assessments established by the three associations in consideration for the services provided. I understand that those annual amounts are subject to periodic change by the governing bodies of the associations. I authorize on a continuing basis, and regardless of my membership status, the payment of those annual amounts established by the three associations through payroll deduction or other arrangement unless I revoke this authorization only by written notification to GAE, my local association and employer (if applicable) between September 1 and September 30 of each year.

Member Signature : _____ Date: _____