### PENNSYLVANIA STATE EDUCATION ASSOCIATION PSEA-AFFILIATED LOCAL ASSOCIATION NATIONAL EDUCATION ASSOCIATION 2019-2020 EA ENROLLMENT FORM

#### LOCAL ASSOCIATION NUMBER | LOCAL ASSOCIATION NAME/EDUCATIONAL EMPLOYER | BUILDING NAME
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#### MEMBERSHIP COMMITMENT AND PAYMENT AUTHORIZATION

#### PSEA has established a political action committee (PSEA-PACE) to support candidates in state and local elections. PSEA-PACE collects voluntary contributions from Association members and uses those contributions for political purposes including, but not limited to, making contributions to and expenditures on behalf of friends of public education who are candidates for state and local office. The National Education Association Fund for Children and Public Education (NEA FUND) collects voluntary contributions to support candidates in state and local elections. Contributions to NEA FUND are deductible as charitable contributions for federal and state income tax purposes. Contributions to PSEA-PACE are not deductible as charitable contributions for federal or state income tax purposes.

#### CONTINUOUS PSEA-PACE AND NEA FUND PLEDGE BY PAYROLL DEDUCTION

 excess of $200 in a calendar year. Federal law prohibits the NEA Fund from receiving contributions from persons other than members of the NEA and its affiliates and their immediate families. All contributions from persons other than members of NEA and its affiliates, and their immediate families, will be returned forthwith.

With full knowledge of this information, I agree that my authorization for political action pledges as indicated by the check marks (✓) below and my authorization for payroll deduction, if available, shall continue in force from year to year unless revoked or modified by me by giving written notice to my local association.

#### MEMBERSHIP COMMITMENT AND PAYMENT AUTHORIZATION

**Membership Commitment:** Yes, I choose to become a member of ______________________ local association, PSEA, and NEA. I voluntarily accept unified membership in these associations and agree to abide by the Constitution and Bylaws of all three associations. I understand that my membership will be continuous unless I provide a written, signed notice to my local association or PSEA that I no longer want to be a member.

**Annual Payment Agreement:** I hereby agree to pay the yearly dues established by my local association, PSEA, and NEA for my membership category in consideration for the services provided by the three associations. I understand the amounts may be subject to change each year by the governing bodies of the associations. I agree to payment of those yearly amounts on a continuing basis, through payroll deduction or other arrangement, regardless of my membership status. While I may resign my membership at any time, I agree to pay an amount equal to my full yearly dues, unless I resign my membership through a signed notice to my local association or to PSEA no later than October 1 of each membership year.

I UNDERSTAND THIS AGREEMENT IS VOLUNTARY AND THAT I HAVE THE LEGAL RIGHT TO REFUSE TO SIGN THIS AGREEMENT WITHOUT SUFFERING ANY REPRISAL.

Dues payments, and any contributions to NEA Fund and PSEA-PACE are not deductible as charitable contributions for federal or state income tax purposes.

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**SIGNATURE**

**DATE**

**HIRE DATE**

**LOCAL OFFICER VERIFICATION**

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