WN YOUR POWE

Texas AFT (American Federation of Teachers) members may use this official form to enroll in our union's new dues payment system using bank draft. Taking this proactive step right now will ensure that the voice of hard working public school employees remains strong.

The new dues payment system will begin depending on your local affiliate's implementation schedule. You will be informed of the conversion date from payroll deduction to the new alternative system. Details available at www.texasaft.org or call 1-800-252-9350.



□ New Member / □ Update Profile

1. YOUR INFORMATION Please print clearly

NAME:	DOB:	SSN (Last 4 Digits):
PERSONAL EMAIL:		
HOME PHONE:	CELL PHONE:	Opt-In for Text Msg Alerts
MAILING ADDRESS:		APT:
CITY:	STATE:	ZIP:
POSITION:		
DISTRICT (ISD): Fort Bend ISD	CAMPUS NAME:	

BUILD A POWERFUL VOICE ► JOIN COPE 2.

JOIN OUR COMMITTEE ON POLITICAL EDUCATION (COPE): Members are encouraged to make a voluntary contribution to our Committee on Political Education. Help us support pro-public school candidates by making a regular monthly contribution. Change starts with you; let's make a difference together. COPE contribution will be added to your monthly dues amount.

SIGNATURE FOR COPE: DATE (COPE AUTHORIZATION): DROP PAYROLL DEDUCTION CONVERTING TO NEW DUES SYSTEM – Current 3. members must drop from the district payroll deduction to prevent double deductions.

_ I.S.D. to discontinue my payroll dues deductions for the following organization(s): I authorize Fort Bend

□ FORT BEND EMPLOYEE FEDERATION □ ATPE □ TCTA □ TSTA

Signature:

PeopleSoft ID# Date:

OWN YOUR POWER ► NEW DUES PAYMENT PROCESS 4.

TEXAS AFT LOCAL AFFILIATE NAME:

Fort Bend AFT

ELECTRONIC DUES PAYMENT: I authorize the above named entity to draft my bank account for the amount equal to my union dues. The monthly dues amount may change if required by local, state or national constitutions. I authorize my bank to adjust my monthly payment when notified by the named entity listed above. This authorization remains in effect until terminated in writing by me. These deductions will continue for this school year and future years, including any increases in dues, until terminated by me in writing.

BANK NAME:

ACCOUNT TYPE:
CHECKING
SAVINGS

BANK ROUTING NUMBER:

BANK ACCOUNT NUMBER:

DUES AMOUNT TO BE DEDUCTED:

SIGNATURE:

DATE:

Fort Bend AFT 16-17 Membership Dues Rates: Ph: 281-240-1865 **Teachers/Certified Employees** 12621 W. Airport Ste. 400 (24 checks) \$23.98 Fax: 281-240-1001 Sugar Land, Texas 77478 Employees earning \$25,000 or less (24 checks) \$14.79 Employees earning \$15,000 or less (24 checks) \$10.86 Employees earning \$15,000 or less (20 checks) \$13.10