

**SHAKER HEIGHTS TEACHERS' ASSOCIATION
ENROLLMENT AND DUES AUTHORIZATION FORM**

Last Name:

First Name:

School(s) and ASSIGNMENT:

Personal Email Account:

Annual dues are \$300.00

Indicate method of payment:

- Check:** Members who pay by check must do so in full, prior to October 1.

- Payroll Deduction:** Payroll deductions begin with the first pay in October, and consist of 10 equal deductions.

I hereby authorize the Board of Education to deduct from my earnings the dues of the Shaker Heights Teachers' Association. This Authorization shall continue from year to year unless and until revoked by me in writing and provided to both the SHTA and the Board of Education.

Member's Signature: _____ **Date:** _____

Submit this form to your SHTA Head Building Representative.

Please Note:

- Members that are employed part time owe full membership dues. Employees that become members for less than a full year owe full membership dues. Dues are never prorated for members that are employed before January 1.
- No portion of the dues is refundable.
- Payroll deductions shall automatically continue from year to year unless the member notifies the Association and payroll office in writing, prior to October 1 of the current school year, that he or she wishes to stop payroll deductions.
- A member who becomes an employee after January 1 is responsible for 50% of the full membership dues.