

## 2021-2022 UFF At Large Membership Form

Please Print Complete Information

\_\_\_\_\_  
University/College

\_\_\_\_\_  
Last Name, First Name, MI

\_\_\_\_\_  
Department/Unit

\_\_\_\_\_  
Home Street Address

\_\_\_\_\_  
Position/Title

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Cell Phone #

\_\_\_\_\_  
Home Phone #

\_\_\_\_\_  
E-mail address -- Personal/Home **only**

\_\_\_\_\_  
XXX-XX-

\_\_\_\_\_  
Last four digits of SSN

**Check or credit card payment must be sent in along with this form.**

### Non-bargaining member categories

<b>Category</b>	<b>NEA/AFT</b>	<b>FEA</b>	<b>FL AFL-CIO</b>	<b>CLC</b>	<b>UFF</b>	<b>Total</b>
<b>At-Large</b>	\$239.76	\$230.14	\$6.00	\$3.60	\$45.00	\$524.50

Direct Payment dues: (check one)

Annually       Semi-annually (One-half the annual rate)

**Membership begins date of receipt by UFF Office.**

Check Enclosed (make out to UFF)      Check Amount\_\_\_\_\_

**or**

Charge to credit card      Amount to Charge\_\_\_\_\_

Visa # \_\_\_\_\_ exp. Date \_\_\_\_\_ CVV \_\_\_\_\_

M/C# \_\_\_\_\_ exp. Date \_\_\_\_\_ CVV \_\_\_\_\_

Numerical Value of Street Address \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

**Please enroll me immediately as a member of the United Faculty of Florida (FEA, NEA-AFT, AFL-CIO).**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

(Signature authorizes membership and credit card charges if applicable)

**Please return this form to** UFF 115 N. Calhoun St, Suite 6; Tallahassee, FL 32301.  
For questions, please contact UFF Office at 850-224-8220 or aileen.ray@floridaea.org

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For questions, please contact Aileen Ray, 850-224-8220, [aileen.ray@floridaea.org](mailto:aileen.ray@floridaea.org)