



2022-2023 Direct Pay (1%)
Dues 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.

Membership Dues are 1% of salary

Membership dues shall be one percent of regular salary for members of those chapters that are bargaining agents or part of larger units for which the United Faculty of Florida is the bargaining agent or for those members serving as executive officers of UFF, FEA, AFT or NEA. Regular dues shall include the dues of FEA, AFT, and NEA.

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 Aileen Ray, 850-224-8220, aileen.ray@floridaea.org