

South San Antonio Federation of Teachers and Support Personnel

AFT Membership Record

chool/Department	Job Title		
signature	Employee ID # o	or SSN #	
Jame	Please Print Date		
I hereby voluntarily authorimonthly dues amount to Son Dues will be continuing or increases will be passed the by the South San Antonio Is	ze and request that the South San Antoouth San-AFT from my paycheck. Yearly an annual basis unless I request in wrough. I acknowledge that receipt of this pSD Payroll Office will automatically cancel as that I have previously submitted.	nio ISD deduct and remit my dues will be divided monthly. writing for you to stop. Dues payroll deduction authorization	
and uses them to support political cand Making a contribution is not a condition loss of membership status or rights or to the COPE and understand that this	itical Education (BCFT) collects voluntary contribution didates (\$2.00 per month for Professionals; \$1.00 for not membership and members have a right to refuse benefits. You may decline to contribute to COPE by will not in any way affect my membership status of rigorous are not deductible as charitable contributions for cellaneous itemized deduction.	Auxiliary and Paraprofessionals). without suffering any reprisal or initialing below. "I decline to contribute ghts."(initial)	
Professional	2022-2023 Dues (Bi-Monthly): \$28.85 Paraprofessional/A	Auxiliary\$17.35	
New to the district? Yes /	No If Yes, previous district:		
School/Worksite:			
City:	State:	ZIP:	
MailingAddress:			
Home email:	Cell Phone:	Cell Phone:	
DOB:	Employee ID # or SSN (Last 4 Digits):		

Return this form to your AFT Representative or mail to South San AFT at:

10615 Perrin Beitel Rd, Suite 203, San Antonio TX 78217 - Phone: (210) 794-8877