## Newfound Teachers' Union, AFT #6557, AFT-NH, AFL-CIO Union Membership Form

**Authorization for Dues Deduction** 

NAME:

(please print)

DATE:

I hereby request and authorize the Newfound Area School District to deduct union dues in an amount certified annually by the Treasurer of the Newfound Teachers' Union, AFT #6557, AFT-NH, AFL-CIO in equal payroll installments. The amount shall be paid to the TREASURER of Newfound Teachers' Union, AFT Local #6557, AFT-NH, AFL-CIO and represents payment for my DUES. This authorization shall continue in full force and effect from year to year, unless I notify the Office of the Superintendent and the Newfound Teachers' Union Treasurer in writing between June 1<sup>st</sup> and June 30<sup>th</sup>, to cease deductions for the coming year.

Employee's Signature	Dated
SCHOOL	HOME ADDRESS:
POSITION	
HOME EMAIL	
HOME PHONE	_

Please check here if you choose to pay your full annual dues in one lump sum payment on or before October 1<sup>st</sup>.

Please return this form to the Newfound Teachers' Union Membership Chair.