



Early Enrollment Membership Incentive Plan 2019-2020

Enroll April 1, 2019 – pay dues September 1, 2019

Plan Eligibility: must be a *first time ever, new to NEA/NEA-New Hampshire* educator and employed in a local affiliated with NEA-New Hampshire.

Prior to August 31, 2019 you will receive:

- \$1 Million NEA Educators Employment Liability Insurance coverage.
- Discounts and access to select NEA Member Benefits (www.neamb.com).
- The opportunity to participate in NEA-New Hampshire activities.
- Association communications featuring education and member-related news.

September 1, 2019 you will receive:

- Opportunities to join a coalition that designs, protects and improves public education.
- Belong to the largest community of educators in New Hampshire and the United States.
- Professional Development Offerings at very affordable rates.
- Two free 30-minute legal consultations per year for personal matters.
- Exclusive access to the "Members Only" section of the NEA-New Hampshire website.
- Opportunity to hold local/state leadership positions.
- Access to NEA-New Hampshire staff for employment related matters.
- Numerous ways to save money via NEAMB.com.

To Join: Complete the *Pledge Commitment form on the back and a NEA-New Hampshire Membership Enrollment form.*

Return both forms to NEA-New Hampshire, 9 South Spring Street, Concord, NH 03301 between April 1 and July 31, 2019.

Pledge Commitment

As a participant in my Local Association/NEA-New Hampshire/National Education Association Early Enrollment Membership Incentive Plan, I am eligible to receive – prior to September 1, 2019, but in no event before April 1, 2019 – benefits under the NEA Educators Employment Liability Insurance Program, as well as access to select NEA Member Benefits programs.

As a condition of eligibility for these benefits, I agree to pay the appropriate unified *Active* membership dues for the 2019-2020 membership year in accordance with established payment procedures. Should I fail to do so, my eligibility to receive benefits under the NEA Educators Employment Liability Insurance Program shall immediately terminate. In addition, I shall become liable for the cost of any benefits that were provided to me under the NEA Educators Employment Liability Insurance Program prior to September 1, 2019.

Name (Printed)

Local Association

Home Address

Home Telephone

Home Email

Signature

Date

Questions? Contact your UniServ Assistant at NEA-New Hampshire.
1-866-556-3264

Name: _____ Gender: _____

Last Four Digits of Social Security #: _____ Ethnicity*: _____ Date of Birth: ____/____/____

Mailing Address: _____

Physical Address: _____

Home Phone: _____ Cell Phone: _____

Home Email Address: _____ Local Association Name: _____

Building Name: _____ Date of Hire: ____/____/____

Position: _____ Subject: _____

By providing my phone number, I understand that the National Education Association, NEA Member Benefits and NEA360 may use automated calling techniques and/or text message me on my cellular phone on a periodic basis. Neither the National Education Association nor any of its affiliates charge for text message alerts. Carrier message and data rates may apply to such alerts. Text STOP to 84693 to stop receiving NEA messages. Text HELP to 84693 or go to nea.org/terms for more information.

Yes — I want to join my colleagues by becoming a member of the _____ (Local Association Name), the National Education Association-New Hampshire, and the National Education Association. I hereby request and voluntarily accept membership in these associations, and agree to abide by the Constitution and Bylaws of all three associations. Membership is annual beginning September 1 and automatically renews annually thereafter.

Member Signature: _____ Date: ____/____/____

Category	Membership Type Code	Annual Amount
NEA		
NEA-NH		
Local Dues		
NEA-NH Fund (Apple Corps Fund) (suggested \$25) ***		
NEA Fund (FCPE) (suggested \$15) ***		
Total Annual Dues Obligation		

NEA-New Hampshire Payment Authorization Form Must Be Completed and Accompany Membership Form if Paying by EFT or CC		
Payment	<input checked="" type="checkbox"/>	Method
(EasyPay) EFT		Dues will be deducted from your bank account after signing up on the NEA-NH website or by filling out an EFT Authorization form.
Check		Dues paid in full upon enrollment. (One annual payment)
MC/VISA		Dues paid in full upon enrollment using the NEA-NH website or by Credit Card Authorization form. (One annual payment)
Payroll Deduction		Dues deducted from your paycheck. Please check with the SAU Office to be sure the correct dues amount is being deducted.

*** NEA FUND and APPLE CORPS FUND - The National Education Association Fund for Children and Public Education (NEA FUND) and the New Hampshire Education Political Action (APPLE CORPS FUND) collect voluntary contributions from Association members and use these contributions for political purposes, including, but not limited to, making contributions to and expenditures on behalf of friends of public education who are candidates for federal office. Only U.S. citizens or lawful permanent residents may contribute to the NEA FUND and the APPLE CORPS FUND. Contributions to the NEA FUND and APPLE CORP FUND are voluntary; making a contribution is neither a condition of employment nor membership in the Association, and members have the right to refuse to contribute without suffering any reprisal. Although the NEA FUND requests an annual contribution of \$15 and the APPLE CORPS FUND requests an annual contribution of \$25, this is only a suggestion. A member may contribute more or less than the suggested amount, or may contribute nothing at all, without it affecting his or her membership status, rights, or benefits in NEA or any of its affiliates.

*** Contributions or gifts to the NEA FUND and the APPLE CORPS FUND are not deductible as charitable contributions for federal income tax purposes. Federal law requires political committees to report the name, mailing address, occupation, and name of employer for each individual whose contributions aggregate in excess of \$200 in a calendar year.

*** Federal law prohibits the NEA FUND from receiving donations from persons other than members of NEA and its affiliates, and their immediate families. All donations from persons other than members of NEA and its affiliates, and their immediate families, will be returned forthwith.

Dues payments are not deductible as charitable contributions for federal income tax purposes.

Yes — I understand and agree: 1) annual membership dues may change from year to year; 2) dues may be paid annually or incrementally, however, the financial obligation for membership is an annual fee and any cancellation after December 1 will result in a dues obligation for the remaining portion of the year.

Member Signature: _____ Date: ____/____/____

Local Association Representative Signature: _____ Date: ____/____/____

2019-2020 NEA AND NEA-NH DUES

Confirmed at NEA-NH Assembly of Delegates 3/22/19

Membership Type	Type	2019 - 2020		
		NEA Dues	NEA-NH Dues	Total Dues
Active Professional 100%	AC-1-100	\$196.00	\$466.91	\$662.91
Active Professional 100% (First step)	AC-1-60	\$196.00	\$280.15	\$476.15
Active Professional 100% (Second step)	AC-1-80	\$196.00	\$373.53	\$569.53
Active Professional 50%	AC-1-50	\$109.50	\$233.46	\$342.96
Active Professional 50% (First step)	AC-1-30	\$109.50	\$140.08	\$249.58
Active Professional 50% (Second step)	AC-1-40	\$109.50	\$186.77	\$296.27
Active Professional 25%	AC-1-25	\$66.50	\$116.73	\$183.23
Active Professional 25% (First step)	AC-1-15	\$66.50	\$70.04	\$136.54
Active Professional 25% (Second step)	AC-1-20	\$66.50	\$93.39	\$159.89
Active ESP 100% (> 1700 hrs)	ES-0-100	\$119.50	\$280.15	\$399.65
Active ESP 100% (> 1700 hrs, First year)	ES-0-FT8	\$119.50	\$224.12	\$343.62
Active ESP 100% (> 1700 hrs, Second year)	ES-0-FT9	\$119.50	\$252.14	\$371.64
Active ESP 75% (751 to 1700 hrs)	ES-0-75	\$119.50	\$210.12	\$329.62
Active ESP 75% (751 to 1700 hrs, First year)	ES-0-3Q8	\$119.50	\$168.10	\$287.60
Active ESP 75% (751 to 1700 hrs, Second year)	ES-0-3Q9	\$119.50	\$189.11	\$308.61
Active ESP 50% (401 to 750 hrs)	ES-0-50	\$71.50	\$140.08	\$211.58
Active ESP 50% (401 to 750 hrs, First year)	ES-0-HT8	\$71.50	\$112.06	\$183.56
Active ESP 50% (401 to 750 hrs, Second year)	ES-0-HT9	\$71.50	\$126.07	\$197.57
Active ESP 25% (400 and less hrs)	ES-0-25	\$47.50	\$70.04	\$117.54
Active ESP 25% (400 and less hrs, First year)	ES-0-QT8	\$47.50	\$56.03	\$103.53
Active ESP 25% (400 and less hrs, Second year)	ES-0-QT9	\$47.50	\$63.04	\$110.54
Reserve-Professional (25% of active)	RS-1-0	\$86.50	\$116.73	\$203.23
Reserve - ESP (25% of active)	RS-2-0	\$48.50	\$70.04	\$118.54
Retired Annual	RT-8-0	\$35.00	\$25.00	\$60.00
Retired Lifetime (Initial Year)	RT-7-7	\$300.00	\$100.00	\$400.00
Pre-retired	RT-9-7	\$300.00	\$100.00	\$400.00
Student	ST-0-0	\$15.00	\$5.00	\$20.00



Payment Options for Membership

This payment option allows members to pay their dues electronically using Electronic Fund Transfer (EFT) or pay by credit card. They will have a choice of different payment options.

If they elect this option, please have them visit the NEA-NH website at www.neanh.org, click the EasyPay logo on any page or click the "Membership" tab, then scroll down the page to click "Pay Dues Using EasyPay."

They will need their Member ID number, home zip code, home email address, checking or savings account number and the bank routing number.

New members who choose to pay by EasyPay will be provided with their membership ID once their membership form has been processed.

The website is user friendly and will guide you through the process:

- At the first screen, they will enter their Member ID number and home zip code, and then hit NEXT. (If they have moved, they may need to use their previous zip code).
 - The second screen displays their contact information (much of it will pre-populate based on information you provided on your membership form). Please correct and fill in any missing information and then hit NEXT.
 - The third screen displays your "Deduction Amount" and the "number of EFT payments." The system calculates the amount based on your membership type. You can also click a link to show more details. Hit NEXT.
 - At the fourth screen, they will enter their banking information. Hit NEXT.
 - The fifth screen displays the "Deduction Amount," number of installments (based on the number of months or pay periods left in the year), and the deduction start date. Their Bank Account Number and Bank Routing Number will also be displayed. Click to "Agree" to the terms.
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- After completing the required online form, they will receive an email confirming their enrollment.
 - The entire process should only take about five minutes.
 - If you have any questions, please contact your UniServ Assistant at 603-224-7751.

NEA-New Hampshire Payment Authorization Form

This completed form must accompany the membership form for the enrollment process to be completed if paying by EFT or Credit Card.

Local Association Name: _____

I _____ authorize NEA-New Hampshire to initiate credit or debit entries to my account with the financial institution named below. This is to remain in full force and effect until the NEA-New Hampshire or its designated local has received written notification of termination in such time and in such manner as to afford the NEA-New Hampshire or its designated local a reasonable opportunity to act on it.

EFT - Electronic Funds Transfer

I agree to enroll online when I receive my membership identification number via email from NEA-New Hampshire.

I authorize NEA-New Hampshire to enroll on my behalf using the information provided below. I understand that I must choose one annual payment OR local deduction schedule.

Online Credit Card (This option only available through November 30; One Annual Payment)

I agree to enroll online when I receive my membership identification number via email from NEA-New Hampshire.

I authorize NEA-New Hampshire to enroll on my behalf using the information provided below. I understand that this is payment of my full yearly dues obligation and will be processed upon receipt. I understand that my credit card will be charged annually.

Member Signature: _____ Date: _____

Electronic Funds Transfer (**One Annual Payment** or **Local Deduction Schedule**)
(select preferred schedule above)

Name: _____

Bank Name: _____ Account Type: Checking or Savings

Bank Routing # (9 digits) _____

Bank Account #: _____

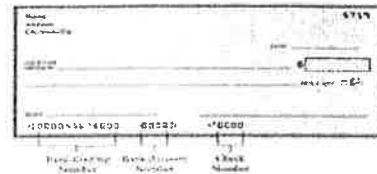
Please attach a voided check for checking account. (No deposit slips)

NEA (National) Dues: _____

NEA-New Hampshire (State) Dues: _____

Total: _____

Home Email _____ Phone _____



Online Credit Card (This option only available through November 30; One Annual Payment ONLY)

Name as it appears on Credit Card: _____

Credit Card Number: _____

Expiration Date: ____ / ____ CVV: _____ MC _____ VISA _____

Billing Address _____

City, State, Zip _____

(as it appears on credit card statement)

NEA (National) Dues: _____

NEA-New Hampshire (State) Dues: _____

Total: _____

Home Email _____ Phone _____

By signing this form, you give us permission to deduct from your bank account or charge your credit card the amount indicated on this form and does not provide authorization for any additional unrelated charges or credits to your account.



Dues Payment Options

Please speak with your local association building representative about these options.

EasyPay (EFT): This payment option allows you to pay your dues in monthly installments through your checking or savings account. A completed NEA-NH Payment Authorization form must accompany the membership form.

Cash or Check: Pay your dues in a one-time payment at the beginning of the school year. If you elect this option, you will pay your local association directly; all checks should be made payable to your local association.

Credit Card: Your dues can be paid in full using a credit card at the beginning of the school year. A completed NEA-NH Payment Authorization form must accompany the membership form.

Payroll Deduction: Pay your dues in installments over the school year through the SAU. If you elect this option, you will need to see your local building representative or contact your SAU to provide authorization for this option.

Subject Codes

Adult Basic Ed
Agric and Natrl Resources
Art
Basic Ed Curriculum
Basic Skills and Remed Ed
Bilingual Ed
Business Ed
Coaching
Communications
Computer and Info Sci
Construction
Cosmetology
Distributive Ed/Co-op
Drivers Ed
Early Child Develop
Engineering
Engl as a Second Lang
Engl/Lang Arts
Family and Consumer Sci
Foreign Lang and Lit
General Subjects
Health and Phys Ed
Home Economics
Industrial Arts
Law Enforcement
Marketing
Mathematics
Music
No Subj Taught
Other
Physical Sciences
Reading
Religion/Philosophy
ROTC
Social Studies/Social Sci
Special/Develop Ed
Speech and Drama
Unknown
Voc and Tech Ed

Position Codes

Academic Prof (Non-Tching)
Academic Prof (Tching/Rsch)
Administrator*
Adult Educator
Behavior Specialist
Bldg/Grnds Maint/Repairs
Classroom Teacher
Coach
Counselor
Family and Consumer Science
Food Services
Health and Student Services
Interpreter
Librarian/Media Specialist
No Position Held
Occupational Therapist
Other
ParaEd (Instruct/Non-Instruct)
Physical Therapist
Psychologist
Reading Specialist
ROTC Instructor
Security Services
Secy/Clerk/Admin Srvcs
Social Worker
Special/Develop Ed
Speech/Hearing Therapist
Technical Services
Trade/Craft/Machine Oprs
Trans/Dlvy/Veh Mechanics
Tutor
Unknown
*Directly hires, evaluates,
transfers, disciplines or dismisses

*Ethnicity

Ethnic minority information is optional, and failure to provide it will in no way affect your membership status, rights or benefits in NEA or any of its affiliates.

The information will be kept confidential.

American Indian/Alaska Native
Asian
Black
Caucasian
Hispanic
Multi-Ethnic
Native Hawaiian/Pacific Islander
Other
Unknown