



# Socorro AFT Membership Application

## 1. YOUR INFORMATION Please print clearly

New Member /  Current member switch to ACH

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_ Employee ID #: \_\_\_\_\_

PERSONAL EMAIL: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ APT: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

POSITION: \_\_\_\_\_ DEPARTMENT: \_\_\_\_\_

DISTRICT/ISD: Socorro ISD CAMPUS NAME: \_\_\_\_\_

## 2. BUILD A POWERFUL VOICE ► JOIN COPE

**JOIN OUR COMMITTEE ON POLITICAL EDUCATION (COPE):** Members are encouraged to make a voluntary contribution to our Committee on Political Education, Socorro AFT COPE. Help us support pro-public school candidates by making a regular monthly contribution. Change starts with you; let's make a difference together. Your COPE contribution will be added to your monthly dues amount.

Make a monthly contribution to Socorro AFT COPE:  \$2  \$5  \$10  Other \$ \_\_\_\_\_

### SIGNATURE FOR COPE:

### DATE (COPE AUTHORIZATION):

Socorro AFT encourages all of its members to participate in local campaigns and to support and endorse candidates who will be sympathetic to our issues. It is the function of the Socorro AFT's Committee on Political Education (C.O.P.E) to research issues and candidates, report to the membership, recommend endorsements, and support endorsed candidates with money and volunteers. Making a contribution is not a condition of membership and members have a right to refuse to contribute without suffering any reprisal or loss of membership status, rights or benefits.

My signature above authorizes Socorro AFT to deduct the amount noted as a voluntary contribution to the Socorro AFT C.O.P.E. I understand that this authorization will remain valid as long as I am a member of Socorro AFT and employed by Socorro ISD unless revoked in writing.

## 3. OWN YOUR POWER ► DUES PAYMENT PROCESS

**ELECTRONIC DUES PAYMENT:** I authorize Socorro AFT to draft my bank account for the amount and dates listed on this application. The monthly dues amount may change if required by local, state or national constitutions. I authorize my bank to adjust my monthly payment when notified by the Socorro AFT. This authorization remains in effect until terminated in writing by me. These deductions will continue for this school year and future years, including any increases in dues, until terminated by me in writing. I understand that it is MY responsibility to monitor the correctness of my deductions within 60 days and that no dues refund will be made after that. It is also my duty to inform Socorro AFT in writing of my retirement or resignation from SISD within 30 days. No dues refund after the 30 days.

BANK NAME: \_\_\_\_\_ ACCOUNT TYPE: **Checking**  CHECKING  SAVINGS

BANK ROUTING NUMBER: \_\_\_\_\_ BANK ACCOUNT NUMBER: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Socorro American Federation of Teachers**

**1757 George Dieter #125**

**El Paso, TX 79936**

**(915) 593-2801**

[www.socorroaft.org](http://www.socorroaft.org)