



Membership Application

Yes, I want to join Local 6200, Associated Academic Professionals, AFT, AFL-CIO and show my commitment to quality education and a positive voice for faculty at EOU. The dues amount is 1.4 percent of your base EOU salary. Base salary does not include overload or DDE income.

Name _____ Worksite _____

Residence _____ City _____ Zip _____

Phone _____ Email _____

Social Security Number _____ Position: _____

I understand that union dues may not be deductible for federal income tax purposes; however, under limited circumstances, dues may qualify as a business expense.

Signature _____ Date _____

VOLUNTARY AUTHORIZATION TO WITHHOLD DUES

I, the undersigned employee of Eastern Oregon University, voluntarily authorize my employer to deduct the organization dues, fees and/or assessments in the amount specified by Local 6200, Associated Academic Professionals, AFT, AFL-CIO from my regular paycheck, and to remit that amount to Local 6200 at its current address. This authorization is revocable by me no sooner than one (1) year from the date below and only upon thirty (30) days written notice or upon termination of employment.

I understand that dues paid to the union may not be deductible for federal income tax purposes: however, under limited circumstances, dues may qualify as a business expense.

NAME (Please Print)

JOB TITLE

x _____
SIGNATURE

DATE