## <u>Instructions for completing the enrollment form:</u>

## Please print.

- Your Local Association is CVSTA (Centinela Valley Secondary Teachers Association)
- Complete all personal information.
- For Membership Category, mark category 1 if you are a full-time employee (you work more than 60%)

Less than full-time: 51-60% = Category 2B

34-50% = Category 2A 26-33% = Category 3B

Less than 26% = Category 3A

- Complete the Optional Information if you wish.
- Payment amounts (full-time) for dues will be written in the amount column.
- If you wish to donate to the NEA-Fund (see description at bottom of form), write in an amount in the appropriate box. If not, leave blank. Add up the column for the Annual Total.

A \$20 voluntary contribution to CTA advocacy efforts and the CTA Foundation for Teaching & Learning is included in the CTA dues amount. You may change this amount by completing a CTA change form, available from the office.

Add up the column for the Annual Total.

- Divide by the number of months deductions are taken to get the Monthly Deduction amount. This amount will be deducted from your check instead of the agency fee amount, beginning the month you join.
- For Pay Method, mark either Cash or Payroll, depending on which you prefer. If you wish to pay cash, please include a check with your enrollment form.
- Be sure to sign and date your form at the bottom.
- Call the office if you have any questions: 310-921-2500.

A \$10 annual contribution for CVSTA/South Bay United Teachers-Political Action Committee is automatically included in the local dues amounts. However you may opt-out or change your contribution level if you so desire. The SBUT Political Action Committee donates to *local* school board races and bond measures.

	If you want to <u>change</u> the \$10 annual PAC contribution, fill-out the form below and return it with y enrollment form.	
Name:		Site:
Signatu	ıre:	Date:
IF YOU WANT TO CHANGE YOUR \$10 ANNUAL CONTRIBUTION, CIRCLE AN OPTION BELOW:		
	(a)	I would like to opt-out of any contributions to SBUT-PAC.
	(b)	I would like to decrease my contribution to per month.
	(c)	I would like to increase my contribution to per month.