

WE'RE HERE TO MAKE SURE THAT EVERY STUDENT SUCCEEDS.

Together, we are creating a future shaped by our members, worthy of our students, and essential to the nation.



Step 1: Join! Our 3 million members are united every day to guarantee a great public education for every student. You belong!

MEMBERSHIP COMMITMENT: YES!

I want to join my fellow employees and become a member of my local association, The South Carolina Education Association (The SCEA) and the National Education Association (NEA). I hereby request and voluntarily accept membership in these associations, and agree to abide by the Constitution and Bylaws of all three associations.

ANNUAL PAYMENT AUTHORIZATION: YES!

I hereby agree to pay the annual (Sep. 1 – Aug. 31) dues, fees, and assessments established by the three associations in consideration for the services The SCEA provides. I understand that those annual amounts are subject to periodic change by the governing bodies of the associations. I authorize on a continuing basis, and regardless of my membership status, the payment of those annual amounts established by the three associations through bank draft or other arrangements unless I revoke this authorization in a signed writing sent to membership@TheSCEA.org or faxed to 803-772-0922 between August 1 and August 31 of the membership year immediately preceding the membership year for which the authorization is to be cancelled.

I UNDERSTAND THAT THIS AGREEMENT IS VOLUNTARY AND IS NOT A CONDITION OF EMPLOYMENT AND THAT I HAVE THE LEGAL RIGHT TO REFUSE TO SIGN THIS AGREEMENT WITHOUT SUFFERING ANY REPRISAL.

SIGNATURE:

DATE:

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

First Name:

Last Name:

Position:

Personal Email:

Cell Phone:**

Employer:

Worksite:

Address:

City:

State/Zip:

What year did you enter the profession?

Your association provides support and tools to ensure your success with students. What tools/trainings would you like to hear more about?

Ethnicity:

American Indian/Alaska Native

Asian

Black

Hispanic

Native Hawaiian/Pacific Islander

Caucasian (not Hispanic origin)

Multi-Ethnic

Other

Gender:

Female

Male

Transgender Female

Transgender Male

Gender Expansive/Non-Conforming

Other

****** By providing my phone number, I understand that the NEA and its affiliates, including The SCEA, the local association, NEA Member Benefits, and NEA360, may use automated calling techniques and/or text message me on my cellular phone on a periodic basis. The NEA, The SCEA, and the local association will never charge for text message alerts. Carrier message and data rates may apply to such alerts.

Step 2: Support elected officials who support public education

By contributing to our Political Action Committee (PAC), you help advance policies impacting our students, our members, and public education.

YES! I WANT ELECTED OFFICIALS WHO STAND UP FOR PUBLIC EDUCATION AND MY STUDENTS.

I hereby authorize the following contribution to be split evenly between the NEA Fund and The SCEA Fund for Children and Public Education to build a strong voice for educators.

I want to donate: \$10 \$5 \$1 \$ per pay period

The NEA and The SCEA 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 office. Only U.S. citizens or lawful permanent residents may contribute to these funds. Contributions to the Funds are voluntary; making a contribution is neither a condition of employment nor membership in the NEA, The SCEA, and LEA, and members have the right to refuse to contribute without suffering any reprisal. Although the NEA and The SCEA funds request donations in the amounts listed above, these are only suggestions. A member may contribute more or less than the suggested amounts, or may contribute nothing at all, without it affecting their membership status, rights, or benefits in NEA or any of its affiliates.

Contributions to The NEA and The SCEA funds are not deductible as charitable contributions for federal income tax purposes.

Federal law requires the NEA Fund to use best efforts 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.

SIGNATURE:

DATE:

2021-2022 Dues

Membership Type	NEA	The SCEA	Total
Active Full Time	\$202.00	\$275.00	\$477.00
Active Part Time	\$112.50	\$130.50	\$243.00
Educational Support Personnel FT	\$121.50	\$142.50	\$264.00
Educational Support Personnel PT	\$72.50	\$70.25	\$142.75
Associate	\$0.00	\$124.50	\$124.50
Substitute	\$15.00	\$70.25	\$85.25
Reserve (Former Active Professional)	\$89.50	\$245.00	\$334.50
Reserve (Former Educational Support)	\$49.50	\$127.50	\$177.50
Students	\$15.00	\$5.00	\$20.00

Local Dues

Abbeville	\$10.00 / \$5.00	Clarendon	\$11.00	Laurens	\$8.00
Aiken	\$15.00	Colleton	\$20.00	Lee	\$30.00
Allendale	\$10.00 / \$7.00	Darlington	\$10.00	Lexington 1	\$8.00 / \$4.00
Anderson 1	\$20.00	Denmark-Olar	\$12.00	Lexington 2	\$10.00 / \$5.00
Anderson 2	\$10.00	Dillon	\$10.00 / \$5.00	Marion	\$15.00
Anderson 3	\$15.00 / \$10.00	Dorchester	\$10.00 / \$5.00	Marlboro	\$10.00
Anderson 4	\$10.00	Edgefield	\$10.00	McCormick	\$10.00
Anderson 5	\$10.00	Fairfield	\$15.00	Newberry	\$20.00
Bamberg	\$15.00	Florence 1	\$12.00	Oconee	\$25.00 / \$15.00
Barnwell	\$15.00 / \$7.50	Florence 2 & 5	\$10.00	Orangeburg	\$15.00
Batesburg/Leesville	\$10.00 / \$5.00	Florence 3 & 4	\$10.00 / \$5.00	Palmetto Corr.	\$11.00
Beaufort	\$15.00 / \$8.00	Gaston/Swansea	\$10.00 / \$5.00	Pickens	\$15.00
Berkeley	\$16.00	Georgetown	\$10.00	Richland	\$62.00
Blackville	\$10.00 / \$5.00	Greenville	\$50.00 / \$10.00	Saluda	\$10.00
Calhoun	\$10.00	Greenwood	\$10.00	Spartanburg	\$25.00
Cedar Springs	\$23.00	Hampton	\$6.00 / \$3.00	Summerville	\$10.00
Charleston	\$30.00	Horry	\$20.00	Sumter	\$10.00
Cherokee	\$25.00	Lexington/Richland 5	\$25.00	Union	\$10.00
Chester	\$10.00	Jasper	\$10.00	Williamsburg	\$15.00 / \$7.50
Chesterfield	\$10.00	Kershaw	\$10.00	Williston	\$10.00 / \$5.00
		Lancaster	\$10.00 / \$5.00	York	\$13.00 / \$1.00

Deduction Schedule By Local (Date/Each Month)

2 nd	15 th & 31 st	10 th & 25 th	20 th	25 th	30 th			
Barnwell	Anderson 5	Dorchester	Richland	Allendale	Marlboro	Abbeville	Newberry	Batesburg/Leesville
Blackville	Beaufort	Georgetown	Summerville	Gaston	5 th & 20 th	Anderson 1	Oconee	Florence 3 & 4
Charleston	Berkeley	Greenville	Sumter	Lee	Aiken	Anderson 2	Saluda	
Dillon	Calhoun	Hampton	Williston	Lexington 1		Anderson 3	Spartanburg	
Fairfield	Cherokee	Horry	15 th & 30 th	McCormick		Anderson 4	Union	
Florence 1	Florence 1	Lex-Rich 5	Orangeburg	Swansea		Bamberg	York	
Laurens	Chester	Jasper				Cedar Springs		
Palmetto Corr.	Chesterfield	Kershaw				Edgefield		
	Clarendon	Kershaw				Florence 2 & 5		
	Colleton	Lexington 2				Greenwood		
	Darlington	Marion				Lancaster		
	Denmark-Olar	Pickens						

Step 3: Tell us more

The SCEA works to ensure that schools provide students with opportunities to succeed. Which issues matter most to you?

- Social and racial justice
- Meeting the needs of students in poverty
- Family and community engagement
- Fully funded schools
- Education policy (Contributing to critical decisions affecting my students, school, and district)
- Political advocacy (Supporting education policies to ensure all students have opportunities to succeed)

The SCEA advocates for conditions that retain high-quality educators for all students. Which of these are you interested in learning about?

- Salary
- Educator rights & responsibilities
- Health care benefits
- Pensions and retirement security
- Student debt and/or finances
- Stretching your paycheck
- Working conditions

How did you learn about The SCEA?

Referred by:

Step 4: Payment info

CASH/CHECK (requires full payment of annual dues)

CREDIT/DEBIT CARD*

Name on Account:

Billing Address:

City:

State/Zip:

Card Number:

Exp: (M/Y)

Name as it Appears on Card:

ELECTRONIC FUNDS TRANSFER (EFT)*

Account Type:

Checking

Savings

Name on Account:

Address:

City:

State/Zip:

Name of Bank:

9-Digit Bank Routing Number:

Account Number:

*I authorize The SCEA or its designated local to charge my credit/debit card or checking/savings account, as provided above, for annual dues, fees and assessments and for any authorized PAC contribution. I further authorize those payments to be made through the initial membership year ending August 31, 2021, and recurring annually thereafter, payable in accordance with the Deduction Schedule By Local, above, in the amounts set forth below. I understand that the final installment amount for the membership year may include a residual amount, not to exceed \$10, representing the sum that cannot be evenly distributed among the installments.

I understand that if the governing bodies of NEA or its affiliates changes the amount of annual dues, fees and/or assessment, The SCEA will notify me in writing not less than 10 days before processing any changes to the amount described in the payment summary. Following that notice, I authorize The SCEA to adjust the amount to be charged or debited by adjusting my payments equally over the payment schedule.

I understand that this authorization continues year-to-year and shall remain in effect until the earlier of: 1) my written notice of termination, or 2) the termination of my eligibility to maintain membership in the Association. I understand that the rejection of any charge or debit shall not constitute the termination of my membership. I further understand that The SCEA or the local will notify me in writing if a transaction is rejected and I shall have 7 calendar days to provide updated account information or an accepted alternative method of payment.

MONTHLY DUES PAYMENT: (for office use only)

FULL-TIME

HALF-TIME

PAC

12 or 24 payments by EFT or credit/debit card.

\$

/mo.

\$

/mo.

\$

/mo.

SIGNATURE:

DATE: