



**MCALLEN AFT
Local 6329
MEMBERSHIP APPLICATION**

Dues and Contributions

Name _____
Home Address _____
City _____ TX, Zip _____
Last 4 digits Soc. Sec. # - _____
Employee ID # _____
Home Phone (____) _____
Cell Phone (____) _____
Campus/Worksite _____
Job Title _____
E-mail: (personal, **NOT** school)

Teachers, Counselors, Librarians, and Nurses — Certified Employees:	
Monthly Dues	48.75
Paraprofessionals and Classified — Employees:	
Monthly Dues	26.50

**Members May Donate to our
Committee on Political Education
(COPE)**

McAllen AFT is now accepting donations for our Committee on Political Education (COPE) fund. We use these funds to help elect education friendly legislators, school board members, etc. All funds collected are voluntary. Please visit our website at <http://tx.aft.org/mcallen/> at the PayPal site, enter the amount of your donation, update your total, and click continue to enter your credit card information

I hereby authorize the Payroll Department of the McAllen Independent School District to deduct dues for McAllen AFT from my salary. I further agree to remain a member of McAllen AFT for one full year and agree that my membership with McAllen AFT will automatically be renewed for the following school year or until I notify MISD, in writing, that I wish to discontinue such deductions.

Signature Date

Membership protection does not include pre-existing conditions.

McAllen AFT
2526 Buddy Owens Blvd,
McAllen, TX 78504
Office: 956-682-1143
Fax: 956-631-0190
mcallenaft2@yahoo.com
tx.aft.org



Discontinuation of dues/fees for another association: I hereby authorize McAllen ISD Payroll Department to stop payroll deductions for the following rganization/s:
[] **ATPE—Association of Texas Professional Educators**
[] **TCTA—Texas Classroom Teachers Association**
[] **TSTA—Texas State Teachers Association**
[] **Other:** _____
Signature: _____

NAME OF AFT MEMBER THAT REFERRED YOU