



KANSAS NATIONAL EDUCATION ASSOCIATION  
715 S.W. 10th Avenue, Topeka, KS 66612-1686



Kansas National Education Association

2020-2021

# RESERVE Membership Form

*All fields must be completed in order for membership to be activated.*

Name \_\_\_\_\_  
First Middle Last

SSN (last four) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home and/or Cell Phone # \_\_\_\_\_

Home Email Address \_\_\_\_\_

Local Association (or USD#) \_\_\_\_\_ Work Location \_\_\_\_\_

Position \_\_\_\_\_ Subject \_\_\_\_\_

**Ethnicity** (This information is optional and voluntary and kept confidential.)

- Asian  Caucasian  Black  Hispanic  Native Hawaiian/Pacific Islander  Multi-Ethnic  Other

**Gender**

- Male  Female

**Choose your payment method**

- Electronic Funds Transfer  Cash/Check (Include payment for full amount)  Payroll Deduction

**\*\*If using Electronic Funds Transfer, please complete the bank information below and attach a voided check.\*\***

Full Name of Bank \_\_\_\_\_

Routing Number \_\_\_\_\_

Account Number \_\_\_\_\_

**Account Type**  Checking  Savings

*Prior to any withdrawal of dues from the amount listed above, you will be notified in writing of the amount of the monthly withdrawal and the date that such withdrawals will commence.*

**Select Membership Type**

2020-21 Dues	Previous Active Professional	Previous Active Education Support Professional
NEA Dues	\$88.50	\$49.50
KNEA Dues	\$204.50	\$65.50
Total Dues	\$293.00	\$115.00

*After completing this application, the original signed copy should be sent to KNEA; a scan or photocopy should be provided to the local chapter and for personal records.*

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Signature \_\_\_\_\_ Date \_\_\_\_\_