

MEMBERSHIP APPLICATION



*A Union of Professionals*

**GCVS Association of Professional Staff  
Local 8306**

(PLEASE PRINT)

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

PERSONAL (NON-WORK) E-MAIL: \_\_\_\_\_

SCHOOL/BUILDING/ROOM #: \_\_\_\_\_

TITLE: (CHECK ONE)

ADJUSTMENT COUNSELOR       GUIDANCE COUNSELOR       NURSE       TEACHER

EMPLOYMENT STATUS: (CHECK ONE)       FULL TIME       PART TIME (LESS THAN 20 HOURS/WEEK)

**MEMBERSHIP APPLICATION AND AUTHORIZATION FOR DUES DEDUCTION**

- I hereby request and accept membership in the Greater Commonwealth Virtual School Association of Professional Staff, Local 8306 and I agree to abide by its Constitution and Bylaws. I authorize the union and its successor or assignee to act as my exclusive bargaining representative for purposes of collective bargaining with respect to wages, hours and other terms and conditions of employment with my employer.
- Effective immediately, I hereby authorize and direct my Employer to deduct from my pay each pay period and transmit to the membership dues in the amount established or revised by the Greater Commonwealth Virtual School Association of Professional Staff, Local 8306 in accordance with the Greater Commonwealth Virtual School Association of Professional Staff, Local 8306 Constitution and By-Laws. There shall be no change in the amount of dues deducted without 60 days prior notice to me by the Greater Commonwealth Virtual School Association of Professional Staff, Local 8306. If for any reason my Employer fails to make a deduction, I authorize the Employer to make such deduction in the subsequent payroll period.

I recognize that my authorization of dues deduction, and continuation of such authorization from one year to the next, is voluntary and not a condition of my employment.

In order to comply with the Internal Revenue Service ruling, be advised that your membership dues are not deductible for federal income tax purposes. However, they may be deductible as ordinary and necessary business expenses.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**PAYROLL/TREASURER USE ONLY**

- |                                           |                                         |                                            |                                           |
|-------------------------------------------|-----------------------------------------|--------------------------------------------|-------------------------------------------|
| <input type="checkbox"/> FULL DUES RATE   | <input type="checkbox"/> HALF DUES RATE | <input type="checkbox"/> QUARTER DUES RATE | <input type="checkbox"/> EIGHTH DUES RATE |
| <input type="checkbox"/> 52 WEEK EMPLOYEE |                                         | <input type="checkbox"/> 40 WEEK EMPLOYEE  |                                           |