



# SUBSTITUTE, TEACHER RE-ENTRY AND GENERAL MEMBERSHIP ANNUAL APPLICATION

**FILL, SAVE AND PRINT ALL PAGES**

**LAST FOUR DIGITS** OF SOCIAL SECURITY NO. **XXX-XX-**

**SCHOOL YEAR:** (ex. 2020- 2021)

**CHECK ONE:** MR MRS MS MISS DR NONE

FIRST NAME M.I. LAST NAME

SUFFIX MAIDEN NAME

PREFERRED NAME / NICKNAME BIRTHDATE

**CHECK ONE:** MALE FEMALE GENDER EXPANSIVE TRANSGENDER MALE TRANSGENDER FEMALE

**CHECK ONE:** HE/HIM/HIS SHE/HER/HERS THEY/THEM/THEIR USE NAME

HOME ADDRESS – STREET

CITY STATE ZIP CODE

COUNTY

EMAIL ADDRESS (PERSONAL) EMAIL ADDRESS (WORK)

HOME PHONE W/ AREA CODE WORK PHONE W/ AREA CODE

CELL PHONE W/ AREA CODE PREFERRED PHONE: HOME WORK CELL

**ETHNIC CODE**

- AMERICAN INDIAN/ALASKA NATIVE
- ASIAN
- BLACK/AFRICAN AMERICAN
- CAUCASIAN
- HISPANIC/LATINO
- NATIVE HAWAIIAN/PACIFIC ISLANDER
- MULTI-ETHNIC
- UNKNOWN
- OTHER (SPECIFY)

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**PLEASE SELECT ONE PAYMENT OPTION BELOW:**

**EFT** — COMPLETE ELECTRONIC FUNDS TRANSFER–BANK DRAFT AUTHORIZATION BELOW.

Bank Name Account Type (Check One) Checking Savings

Bank Routing Number (9) Digits Bank Account Number

**CREDIT CARD** — COMPLETE CREDIT CARD AUTHORIZATION (VISA/MASTERCARD/DISCOVER/AMEX) BELOW.

Cardholder Name Exp. Date (MM/YY)

Credit Card Number Card Security Code

**Check** — PLEASE MAKE CHECK PAYABLE TO MEA

**PLEASE SELECT FROM THE FOLLOWING OPTIONS:**

**Teacher Re-Entry/Substitute Membership – \$100**

Teacher Re-Entry/Substitute membership is open to any person who is working towards teacher re-certification and is otherwise ineligible for MEA Active Membership. Upon eligibility for MEA Active Membership, the Teacher Re-Entry/Substitute membership will cease.

The dues rate for Teacher Re-Entry/Substitute membership is \$100 per membership year. If during the membership year (September-June) you become eligible for and become an Active member a pro-rata portion of Teacher Re-Entry/Substitute membership dues will be credited towards MEA Active membership dues.

Note: Teacher Re-entry/Substitute membership does not provide legal representation for legal disputes that may occur nor other benefits that are reserved for Active members. Nor does it provide liability insurance, unless you are employed as a Substitute by a local board of education and you apply for and are approved for NEA Substitute Membership.

**NEA Substitute Membership – add \$15 (for a total of \$115)**

Employing School District(s)

**Substitute Membership – \$51**

For substitute teachers employed by a local board of education but not included in an MEA local bargaining unit.

(\$36 MEA/\$15 NEA)

Employing School District(s)

**General Membership – \$30**

Persons interested in advancing the cause of education who are not eligible for other categories of membership

(MEA membership only, not NEA)

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Amount Paid:

Mail to: MEA MEMBERSHIP DEPARTMENT  
1350 KENDALE BLVD, PO BOX 2573  
EAST LANSING MI 48826-2573

I hereby request and voluntarily accept the above membership in the MEA/NEA, subject to approval by MEA and hereby agree to abide by and be bound by the constitutions and bylaws of the MEA/NEA as may be amended, available online at [mea.org](http://mea.org). Information on dues amounts, which are subject to change each year, is available at [mea.org/join](http://mea.org/join). I verify that the information and category applied for is correct, and I am eligible for membership at this level. I understand that payment of dues is in exchange for benefits that I am not otherwise eligible for and are therefore non-refundable.

MEMBER SIGNATURE

DATE