

**Oklahoma Education Association/National Education Association  
2018-19 Continuous Membership Form**

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

**School District/Institution** \_\_\_\_\_

**Building Name/Location** \_\_\_\_\_

**Last 4 digits of your Social Security #** \_\_\_\_\_

**Home Address** \_\_\_\_\_

**City & State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Home Email** \_\_\_\_\_

**School Email** \_\_\_\_\_

*I'd like to receive email messages from OEA.*     *yes*     *no*

**Home Phone Number** ( \_\_\_\_\_ ) \_\_\_\_\_

**Cell Phone** ( \_\_\_\_\_ ) \_\_\_\_\_

*I'd like to receive text messages from OEA.*     *yes*     *no*

**What was your first year to teach?** \_\_\_\_\_

**Birth Date** \_\_\_\_\_  
MM/DD/Year

**Certified, what is your assignment?**

Grade level and subject \_\_\_\_\_

**Administrator, what is your position?**

Job title, and grade level if appropriate \_\_\_\_\_

**Support, what is your job assignment?**

Clerical, custodial, food service, transportation, etc. \_\_\_\_\_

**X** \_\_\_\_\_

**Member Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Membership is open to those who agree to subscribe to OEA's objectives and abide by its constitution and bylaws.

**NEA Complimentary Life Insurance<sup>SM</sup>** – Membership includes free life insurance and accidental death and dismemberment coverage for eligible members. New members need to designate a beneficiary at [neamb.com/insurance/linall.jsp](http://neamb.com/insurance/linall.jsp) or call 800-637-4636.

**2018-19 Membership Category (check one)**

- OEA/NEA Active Certified \$513.00
- OEA/NEA Active Certified (half-time) \$268.00
- OEA/NEA Active Educational Support \$255.50
- OEA/NEA Active Educational Support (half-time) \$139.50
- Substitute \$175.50

Local Dues \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

**Payment Method**

- Cash     Payroll Deduct

**EFT (Electronic Funds Transfer)** – Please attached a voided check or complete the banking information at the bottom of this form.

Dues payments are not deductible as charitable contributions for federal income tax purposes. Dues payments (or a portion) may be deductible as a miscellaneous itemized deduction.

**ETHNIC MINORITY & VOTER REGISTRATION** information is *optional* and failure to provide it will not affect your membership status, rights, or benefits in OEA/NEA or any of their affiliates.

- American Indian/Alaskan Native     Asian     Black     Caucasian
- Hawaiian/Pacific Islander     Hispanic     Multi-ethnic
- Other     Unknown

Registered Voter?     yes     no

Party Affiliation?     D     R     I

*This information is confidential.*

**Oklahoma Education Association**  
 PO Box 18485, Oklahoma City, OK 73154  
 800/522-8091 • [okea.org](http://okea.org)



*Great Public Schools for Every Student*

**Electronic Funds Transfer – Bank Draft Authorization**

Financial Institution: \_\_\_\_\_

Routing Number (9 digits): 

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Account Number: 

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