## United Faculty of Florida 2015-2016 Associate/At-Large Chapter Membership Form

At-Large members include faculty in colleges and universities where UFF does not have bargaining rights and college or university administrators.

Please Print	Complete Inform	ation					
				University/College			
Last Name, Fin	rst Name, MI		Departme	ent/Unit			
Home Street A	Address		Position/	Position/Title			
City State Zip	Code		Cell Phor	Cell Phone # Home		e Phone #	
			XXX-X	X-			
E-mail address	s Personal/Home	]	Last four digits of SSN				
Check or cre	edit card payment	must be sent in	n along with this form.				
		Non-	bargaining member o	categories			
Category	NEA/AFT	FEA	FL AFL-CIO	CLC	UFF	Total	
At-Large	\$219.57	\$225.36	\$6.00	\$3.60	\$45.00	\$499.55	
Direct Payme	ent dues: (check or	ne)					
	y □Sen	ni-annually (0	One-half the annual rate	e)			
□ Check Ei or	nclosed (make o	out to UFF)	Check Amount				
	o credit card	Amount to Cha	arge				
Visa # exp. Date					Date/		
M/C#				exp. D	Date/_		
Please enroll	me immediately as	s a member of t	the United Faculty of I	Florida (FEA	, NEA-AFT, A	FL-CIO).	
Signature (Signature authorizes membership and credit card charges if applicable)						Date	

**Please return this form to** UFF 115 N. Calhoun Street, Ste. 6, Tallahassee, FL 32301. For questions, please contact Pamela Williams, 850-224-8220, pam.williams@floridaea.org