Memphis-Shelby County Education Association Membership Application

M-SCEA: The Professional Association Serving Educators in Shelby County Schools Be a part of your Professional Organization. Don't Delay. Join Today!

EMPLOYEE ID # CEI		CELL PHONE	L PHONE HOMI		SOCIAL SECURITY #		
PERS	SONAL EMAIL Mr.	DISTRICT I		□ Male □ Female	WORK LOCATION	ANNUAL	
NAME	FIRST	MIDDLE	LAS	ST	ASSOCIATION M-SCEA TOTAL	AMOUNT	
MAILING ADDRESS	ADDRESS					METHOD OF PAYMENT PAYROLL DEDUCTION CASH/CHECK (Due In Full) CREDIT/DEBIT CARD (Due In Full plus Processing Fee)	
DATE OF BIRTH MONTH DAY YEAR		RACE/ETHNICI	TY	POSITION	SUBJECT		
Education A separation pr County Boar any conflicti Dues payme	ssociation (M-SCEA rior to final payment d of Education harm ng provision of this	le as charitable contributions	ntion will conce to be of M-SCEA's	ontinue until revoked in deducted from my last pa s negotiated contract pro-	writing to M-SCÊA. I sycheck. I agree to hol visions and bylaws wil	In the event of d the Shelby l prevail over	
	NT'S SIGNATURI			PRINT NAME -	— Association Repres	entative	
DATE				SIGNATURE —	- Association Represo	entative	

