

# 2025–2026 EARLY ENROLLMENT

## Education West Virginia Membership Authorization

**JOIN AT NO COST!**  
Unlock your member benefits  
by completing this form.



**EWV Membership Dues**  
Check the box that applies to you.  
**No dues until September 1, 2025!**

- Professional
- Part-time Professional
- Professional Substitute
- Support Professional (Service Personnel)
- Part-time Support Professional
- Support Professional Substitute

\*By providing my phone number, I understand that Education West Virginia, the National Education Association, NEA Member Benefits, NEA360 and may use automated calling techniques and/or text message me on my cellular phone on a periodic basis. These groups will never charge for text message alerts. Text STOP in reply to any text message to stop receiving text from the entity that sent the message. Or reply HELP for more information. Carrier message and data rates may apply.

\*\*I hereby authorize EWV to initiate credit or debit entries to my account with the financial institution named hereon. I authorize those payments to be made on a recurring basis, payable in monthly installments as set forth on this form. I understand that in the governing body of EWV or its affiliates authorizes a change in the amount of annual dues, fees and/or assessment, EWV will notify me by email or home mailing address not less than (10) days in advance of processing any changes to the transactions amounts. Following notice, I authorize EWV to adjust the amount to be debited from my account to satisfy any modification by adjusting my payments equally over the payment schedule. I understand that this authorization for the payment of membership dues, fees and assessments continues year-to-year and shall remain in effect until the earlier of: 1) my written notice of termination, or 2) the termination of my eligibility to maintain membership in the Association. I further understand that EWV will notify me in writing if a transaction is rejected and I shall have seven (7) calendar days to provide updated debit account information, or with an accepted alternative method of payment, to continue my payments for annual dues, fees, and assessments.

**Contributions Disclaimer:** As set forth in EWV bylaws, your dues include a contribution of \$11.00 Professional/\$5.00 Support Professional for the Education West Virginia-PAC and one dollar (\$1.00) for the Ballot Initiative Fund (BIF). Education West Virginia-PAC uses contributions for political purposes, including making contributions to and expenditures on behalf of friends of public education who are candidates for state or local office. BIF uses contributions for advocating or opposing ballot issues. Only United States citizens should contribute to the Education West Virginia-PAC or BIF. Members have the right to refuse to contribute without any reprisal. Any person wishing not to participate in Education West Virginia-PAC or BIF or who is ineligible to contribute should contact Education West Virginia prior no later than Oct. 31 and the member may choose to: (a) divert one or both of the assessments to the EWV Foundation, or (b) receive a rebate of either one or both of the assessments. Refund requests must be resubmitted annually no later than Oct. 31. Members can request the form by calling 866-568-9832.

**Tax Deduction Disclosure:** Dues, including contributions to the Education West Virginia-PAC and Ballot Initiative Fund, are not tax deductible as charitable contributions. The annual dues rate will apply unless you join midyear, in which case your dues will be prorated for that membership year. Thereafter, the annual dues rate will apply.

### MEMBERSHIP COMMITMENT:

**YES** – I want to join with my fellow employees and become a member of my local association as well as Education West Virginia, the National Education Association, and the American Federation of Teachers. I hereby request and voluntarily accept membership in these associations and agree to abide by the Constitution and Bylaws of all three associations.

### ANNUAL PAYMENT AUTHORIZATION:

**YES** – I hereby agree to pay the annual (Sep. 1–Aug. 31) dues, fees, and assessments established by local association, EWV, NEA, and AFT in consideration for the services the associations provide. I fully understand that the annual dues required for membership in the four associations are subject to periodic change by the governing bodies of the associations. I authorize on a continuing basis from year-to year, regardless of my membership status, the payment of the annual amounts established by the four associations unless and until I revoke this authorization in a signed writing sent to 1558 Quarrier St., Charleston, WV 25311 via U.S. mail, or by email to EWV@WVEA.ORG between August 1 and August 31 of the membership year immediately preceding the membership year for which the authorization is to be cancelled. I also agree that if I transfer positions or otherwise change jobs into a position that is covered by a different local association my membership will automatically transfer to that new local association and if the annual dues amount for my new local is different than for my existing local, I agree to pay that new amount unless I revoke my payment authorization through the method described above.

The undersigned becomes a member of the EWV/NEA/AFT upon the date this form is signed. **I UNDERSTAND THAT THIS AGREEMENT IS VOLUNTARY AND IS NOT A CONDITION OF EMPLOYMENT AND THAT I HAVE THE LEGAL RIGHT TO REFUSE TO SIGN THIS AGREEMENT WITHOUT SUFFERING ANY REPRISAL.**

Full Name (First, Middle, Last)		
Full Address (Address Line 1, City, State, Zip)		
Home E-Mail Address (REQUIRED)		
School or Work Location		
SSN (Last 4)	Date of Birth	Cell Phone* (REQUIRED)
County Employed		Position

### CHOOSE A METHOD OF PAYMENT

**BANK DRAFT\*\*** – Attach a voided check or complete the form below. Choose your bank draft option.  
(Check one)  Full Amount  Twice a month for 10 months (September–June)

Bank Name	Account Number
Name (as it appears on the bank account)	Routing Number (First set of numbers)

Deductions will be debited twice a month aligned to county pay schedules for 10 months. If the draft date falls on a Saturday or Sunday, the draft will be debited on the closest business day. Information will be sent notifying the member with their deduction amounts 30 days prior to beginning of the 2025–2026 membership year.

**CREDIT CARD\*\*** (Check one)  Full Amount  Monthly Amount (September–June)

Credit Card Number	Expiration Date	CVV No. (3 digits)
Name (as it appears on the credit card)		

Deductions through recurring credit card payments will be debited monthly on or about the 15th of each month for 10 months from September through June. If the draft date falls on a Saturday or Sunday, the draft will be debited on the closest business day. Information will be sent notifying the member with their deduction amounts 30 days prior to beginning of the 2025–2026 membership year.

**CHECK** – EWV will send you an invoice in August for the 2025–2026 membership year.

Member's Signature

Date



# Stronger Together.

**AFT-WV and WVEA  
are now Education  
West Virginia.**

Through EWV we can champion the change we need to support strong public schools in every community.

The more of us are members of the union, the more power we have to improve our working conditions and our students' learning conditions.

We face serious challenges, but together we can be a force for the change our schools need – starting with competitive pay and benefits to attract and retain excellent educators and address our staffing and workload challenges. Join us in building a brighter future for West Virginia.

LEARN MORE AND JOIN US AT  
[WWW.EDUCATIONWV.ORG](http://WWW.EDUCATIONWV.ORG)

**EWV** EDUCATION  
WEST VIRGINIA

UNIFIED FOR EDUCATORS AND PUBLIC SCHOOLS