

PLEASE BECOME A FULL MEMBER OF THE AAUP

If you are currently paying \$22.10 per pay period, you are paying a representation fee and are not a full member of the AAUP. AAUP full member dues are \$26.00 per pay period (only \$3.90 more per pay period for full membership) for 26 pay periods per year.

To encourage you to become a full member and in recognition of the importance the AAUP places on full membership, AAUP’s leadership has approved a rebate program for new full members for the first year of membership. At the conclusion of your first year of full AAUP membership, you will receive a refund check in the amount of \$101.40 (\$3.90 times 26.)

The benefits of being a full member are many. The most important is that full members can vote in chapter elections and on contract ratification. Your full membership is critical to maintain the AAUP as your representative.

To join the AAUP-BHSNJ, simply FILL OUT this Authorization Form and FAX it to 973-972-0776 or SCAN and EMAIL it to: george@aaupbhsnj.org.

Rutgers Biomedical and Health Sciences of New Jersey
American Association of University Professors (AAUP)
Payroll Deduction Authorization

PLEASE PRINT CLEARLY (fill in all information):

Name _____
(last) (first) (middle)

HOME ADDRESS: _____
(address) (city) (state) (zip)

OFFICE PHONE: _____ HOME PHONE: _____

ACADEMIC RANK: _____ DEGREE: _____

SCHOOL: _____ DEPARTMENT: _____

DATE OF HIRE: _____ BIRTH DATE: _____

E-MAIL ADDRESS: _____

I hereby authorize my AAUP Chapter to deduct from my paycheck twenty-six dollars (\$26.00) per pay period as full member dues.

This authorization shall remain in effect unless terminated by me upon written notice of withdrawal or by termination of my employment. The filing of notice of withdrawal shall stop deductions as of the July 1st or January 1st next succeeding the date on which the notice of withdrawal was filed. **Your AAUP dues are tax deductible under the Internal Revenue Code.**

SIGNED _____ DATE _____