



Dear **Pre-Retired** Member,

We want you to be a member of NEA/AEA even after you retire! We are inviting you to pre- pay for your lifetime membership costs.

Pre-Retired Membership is open to any current active member thinking about retiring regardless of his/her retirement date. This membership allows an individual to enroll in the NEA/AEA retirement program, prior to actual retirement, by paying lifetime membership costs within the calendar school year.

NEA/AEA's Pre-Retired membership allows current active members to join the NEA/AEA- Retired program before they officially retire, ensuring a seamless transition and continued access to benefits.

- **Seamless Transition:** Pre-paying for NEA/AEA-Retired lifetime membership ensures a smooth transition into retirement, with no interruption in benefits.
- **Lifetime Membership:** Once you join NEA/AEA-Retired (either through pre- retirement or after retirement), you become a lifetime member.
- **Access to Benefits:** Pre-Retired members, like retired members, have access to NEA/AEA's member benefits, such as insurance, discounts, and engagement opportunities.
- **Save on Future Dues:** Pre-paying your NEA/AEA-Retired dues now means you won't pay them when you retire, even if there's a dues increase in the future.

**Important Note:**

Pre-Retired members must continue to pay annual NEA/AEA ACTIVE dues while they are employed.

Stay connected to the NEA/AEA, keep your NEA/AEA benefits after retirement, and continue fighting for public education after retirement! Ensure your lifetime membership with us this school year!

In Solidarity,

Team AEA

[www.aeaonline.org](http://www.aeaonline.org) 1500 W 4th St #200,  
Little Rock, AR 72201  
(501) 375-4611

ANNUAL Membership * Use the <b>RETIRED</b> Enrollment Form		LIFETIME Membership * Use the <b>RETIRED</b> Enrollment Form		PRE-Retired LIFETIME * Use the <b>ACTIVE</b> Enrollment Form	
<p><b>Pay in full by check:</b> To pay by check, please complete the enrollment form and send it and a check to AEA, 1500 West 4th St., Little Rock, AR 72201.</p> <p><b>Pay by authorizing a monthly bank draft:</b> To pay monthly using your bank account, please complete the enrollment form and the bank draft authorization form, enclose a voided check, and send all three to AEA, 1500 West 4th St., Little Rock, AR 72201.</p> <p><b>Pay by authorizing a monthly credit card charge:</b> To pay monthly using a credit card, please complete the enrollment form and the credit card information form and return both to AEA, 1500 West 4th St., Little Rock, AR 72201.</p>		<p><b>Pay in full by check:</b> To pay by check, please complete the enrollment form and send it and a check to AEA, 1500 West 4th St., Little Rock, AR 72201.</p> <p><b>Pay by authorizing a monthly bank draft:</b> To pay monthly using your bank account, please complete the enrollment form and the bank draft authorization form, enclose a voided check, and send all three to AEA, 1500 West 4th St., Little Rock, AR 72201.</p> <p><b>Pay by authorizing a monthly credit card charge:</b> To pay monthly using a credit card, please complete the enrollment form and the credit card information form and return both to AEA, 1500 West 4th St., Little Rock, AR 72201.</p>		<p><b>Pay in full by check:</b> To pay by check, please complete the enrollment form and send it and a check to AEA, 1500 West 4th St., Little Rock, AR 72201.</p> <p><b>Pay by authorizing a monthly bank draft:</b> To pay monthly using your bank account, please complete the enrollment form and the bank draft authorization form, enclose a voided check, and send all three to AEA, 1500 West 4th St., Little Rock, AR 72201.</p> <p><b>Pay by authorizing a monthly credit card charge:</b> To pay monthly using a credit card, please complete the enrollment form and the credit card information form and return both to AEA, 1500 West 4th St., Little Rock, AR 72201.</p>	
Retired Annual Professional	Retired Annual ESP	Retired Lifetime Professional	Retired Lifetime ESP	PRE-Retired Professional	Pre-Retired ESP
\$35.00	\$21.00	\$300.00	\$180.00	\$300	\$180.00
\$15.00	\$15.00	\$200.00	\$200.00	\$200	\$200
\$50.00	\$36.00	\$500.00	\$380.00	\$500	\$380
<p><b>AEA and NEA are unified. Membership is required in both organizations.</b></p> <p><i>See next page for breakdown of NEA, AEA, and total dues.</i></p>					

Member Type Name	NEA	AEA	Annual Payment	One Payment	Prorated based on enrollment date
Retired Life Initial Yr - Prof	\$300.00	\$200.00		\$500.00	*Prorated by enrollment date
Retired Life Initial Yr - ESP	\$180.00	\$200.00		\$380.00	*Prorated by enrollment date
Retired Annual - Prof	\$35.00	\$15.00	\$50.00		
Retired Annual - ESP	\$21.00	\$15.00	\$36.00		
Pre-Retired Life Initial Yr - Prof	\$300.00	\$200.00			*Prorated by enrollment date
Pre-Retired Life Initial Yr - ESP	\$180.00	\$200.00			*Prorated by enrollment date

EFT & Credit Card Dues Payment Schedules 25-26					
NOTE: all RCC are only 1 schedule					
<i>Payments will be prorated, determined by enrollment date and remainder of scheduled deductions.</i>					
#1 = DEFAULT 20th of the month x 10 months			RCC 22nd of the month x 10 months		
1	9/19/2025		1	9/22/2025	
2	10/20/2025		2	10/22/2025	
3	11/20/2025		3	11/21/2025	
4	12/19/2025		4	12/22/2025	
5	1/20/2026		5	1/22/2026	
6	2/20/2026		6	2/23/2026	
7	3/20/2026		7	3/23/2026	
8	4/20/2026		8	4/22/2026	
9	5/20/2026		9	5/22/2026	
10	6/22/2026		10	6/22/2026	

# Together. A Stronger Voice.



Membership 25-26

## Join Our Union

NEA's 3 million members are united every day to guarantee a great public education for every student. Join us!

### ☐ MEMBERSHIP COMMITMENT: YES!

I want to join my fellow employees and become a member of the local association, the Arkansas Education Association (AEA), and the National Education Association (NEA). 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 the three associations in consideration for the services the union provides. I understand that those annual amounts are subject to periodic change by the governing bodies of the associations. I authorize on a continuing basis, and regardless of my membership status, the payment of those annual amounts established by the three associations, through the payment method selected below, unless I revoke this authorization in a signed writing sent to AEA Membership, 1500 West Fourth Street, Little Rock, AR 72201-1064 or via email to [rpipkins@aeanea.org](mailto:rpipkins@aeanea.org).

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.



Join our  
Union  
Today!

**SIGNATURE:**

**DATE:**

Dues payments are not deductible as charitable contributions for federal income tax purposes.

## PLEASE PRINT LEGIBLY

First Name:  M.I.:  Last Name:  Last 4 Digits of SSN:

Birthdate:  Personal Email:   
(required) Must Not Be School Email address!

Address:  Apt #:  City:  State/ZIP:

Cell Phone\*:  Employer/School District:

Local Association:  Building/Work Site:

\*By providing my cell phone number, I understand that the National Education Association, NEA Member Benefits, NEA360, Arkansas Education Association, and my local affiliate may use automated calling techniques and/or text message me on my cellular phone on a periodic basis. These entities will never charge for text message alerts. Carrier message and data rates may apply to such alerts. Text STOP to 84693 to stop receiving NEA messages. Text HELP to 84693 or go to [nea.org/terms](http://nea.org/terms) for more information.

ASSOCIATION	MEMBERSHIP TYPE	CODE	ANNUAL AMOUNT
NEA	Professional FT <input type="checkbox"/>	AC-1-100	\$219.00
	Professional PT <input type="checkbox"/>	AC-1-50	121.00
	ESP FT <input type="checkbox"/>	AC-2-100	131.50
	ESP PT <input type="checkbox"/>	AC-2-50	77.50
	Substitute <input type="checkbox"/>	SB-0-0	15.00
	Other <input type="checkbox"/>	Other: <input type="text"/>	\$ <input type="text"/>
AEA	Professional FT <input type="checkbox"/>	AC-1-100	\$383.00
	Professional PT <input type="checkbox"/>	AC-1-50	191.50
	ESP FT <input type="checkbox"/>	AC-2-100	155.00
	ESP PT <input type="checkbox"/>	AC-2-50	77.50
	Substitute <input type="checkbox"/>	SB-0-0	25.00
	Other: <input type="checkbox"/>	Other: <input type="text"/>	\$ <input type="text"/>
Local Dues			\$ <input type="text"/>
TOTAL:			\$ <input type="text"/>

SEE REVERSE FOR CODES Position:  Subject:  Political Preference:

AEA, NEA, and the local education association are unified. Membership is required in all organizations.

Method of Payment: ☐ AUTOMATIC MONTHLY BANK DRAFT ☐ AUTOMATIC MONTHLY CREDIT CHARGE ☐ CHECK

(must complete separate form: Bank Account (EFT) or Credit/Debit Card Authorization)

(must complete separate credit/debit card authorization)

## Race/Ethnicity:

- ☐ Native American/Alaska Native ☐ Asian ☐ Black or African-American ☐ Multiracial  
☐ Latin/o/a/x, Hispanic, or Chican/o/a/x ☐ White (not Hispanic) ☐ Native Hawaiian/Pacific Islander ☐ Other

Gender: ☐ Female ☐ Male ☐ Gender Expansive/Non-Conforming

## Tell us about your professional needs

### 1. What year did you enter the profession?

### 2. Your union provides training, support, and tools to ensure your professional success. What would you like to learn more about?

- ☐ Building relationships and meeting students' social-emotional needs ☐ Family and community engagement ☐ Technology  
☐ Instructional and classroom strategies ☐ Health and safety ☐ Social justice and racial equity ☐ Reducing student debt  
☐ Saving money with NEA Member Benefits

### 3. How would you like to participate in your union? (Mark all you are interested in)

- ☐ **Membership, Leadership, & Advocacy**  
Talking to colleagues about joining our union to build power for members. For example, participating as an organizer, building representative, or another Association leadership role.
- ☐ **Political Activism**  
Volunteering with my union to elect pro-public education candidates from both parties—from my local school board to the White House.
- ☐ **Collective Action**  
Helping get the word out about bargaining, meet & confer, or other workplace actions.
- ☐ **School Funding & Education Policy**  
Working to increase education funding at my school, district, and state.
- ☐ **Leading Our Professions**  
Supporting members to grow in their professional practices.
- ☐ **Thinking About It...**  
I'm not ready to volunteer right now, but I'm looking forward to staying informed.

Upon enrollment each active professional and educational support professional member is automatically covered by American Fidelity for \$1,000 - \$5,000 AD&D plus \$1,000 to \$150,000 NEA Complimentary Life Insurance. Register your beneficiary for the NEA Complimentary Life Insurance at [www.neamb.com/teachers-insurance](http://www.neamb.com/teachers-insurance) or by calling 1-800-637-4636.

The following information is represented in the form of codes. Please select the applicable code and write it in the space provided on the enrollment form.

POSITION CODES	
Administrator	ADMN
Adult Educator	ADED
Bookkeeper	BKPR
Bus Driver	BTVD
Bus Aide	TDOT
Classroom Teacher	CLTR
Coach	COCH
Counselor	CNSL
Building/Ground Maintenance/Repair	CUST
Food Services	FSOT
Health and Student Services	HCOT
Librarian	LIBR
Literacy Coach	LITC
Maintenance Personnel	BGOT
Math Coach	INSP
Mechanic	MECH
Occupational Therapist	OCCT
Paraeducator (Instructional/non instructional)	PPOT
Principal/Asst Principal	PRIN
Psychological Examiner	PSYO
Secretary	SEST
Security	GSPW
Speech Therapist	SHTH
Supervisor	SPRV

SUBJECT CODES	
Art	ARTS
Business Ed	BSED
Coaching	COCH
Computer Science	CICS
Elementary (General Subjects)	GSUB
English/Language Arts	ELAR
Family and Consumer Science	FCSC
Foreign Language	FLLI
Gifted & Talented	GTAL
Health and Physical Education	HEPE
Mathematics	MATH
Music	MUSI
Physical Sciences	PHSC
Reading	READ
Social Studies	SSSS
Special Education/Developmental Education	SDED
Speech and Drama	SPDR
Vocational Education	VTED

POLITICAL REFERENCE CODES	
Democrat	D
Republican	R
Independent	I

NEA MEMBERSHIP TYPES		
Active Professional FT	<b>AC-1-100</b>	<b>\$219.00</b>
Active Professional PT	<b>AC-1-50</b>	<b>121.00</b>
Active ESP FT	<b>AC-2-100</b>	<b>131.50</b>
Active ESP PT	<b>AC-2-50</b>	<b>77.50</b>
Pre-Retirement (Life-Professional)	<b>RT-7-7</b>	<b>300.00</b>
Pre-Retirement (Life-ESP)	<b>RT-6-6</b>	<b>180.00</b>
Reserve- Active Professional	<b>RS-1-0</b>	<b>98.00</b>
Reserve -ESP	<b>RS-2-0</b>	<b>54.50</b>
Substitute	<b>SB-0-0</b>	<b>15.00</b>

AEA MEMBERSHIP TYPES		
Active Professional FT	<b>AC-1-100</b>	<b>\$383.00</b>
Active Professional PT	<b>AC-1-50</b>	<b>191.50</b>
Active ESP FT	<b>AC-2-100</b>	<b>155.00</b>
Active ESP PT	<b>AC-2-50</b>	<b>77.50</b>
Pre-Retirement (Life - Professional)	<b>RT-7-7</b>	<b>200.00</b>
Pre-Retirement (Life - ESP )	<b>RT-7-7</b>	<b>200.00</b>
Substitute		

Retired and Aspiring Educator memberships are submitted on

separate forms. Contact the AEA office.

I hereby apply for unified membership in the AEA, NEA and LEA. Membership is open only to those who agree to subscribe to the goals and objectives of the Association and to abide by its Constitution and Bylaws.

\*\*\*Ethnic and political information is optional and failure to provide it will in no way affect your membership status, rights or benefits in AEA, NEA or any of their affiliates. This information will be kept confidential.

# Bank Account (EFT) or Credit/Debit Card Authorization



I agree to pay annual dues I have authorized through:

- ☐ AUTOMATIC BANK DRAFT  
☐ CREDIT/DEBIT CARD

## AUTOMATIC BANK DRAFT

Account Type: ☐ Checking ☐ Savings

Name on Account:  Address:   
City:  State/ZIP:  Name of Bank:   
9-Digit Bank Routing Number:  Account Number:

## CREDIT/DEBIT CARD

Name on Account:   
Billing Address:  City:  State/ZIP:   
Card Number:  Exp. (M/Y):  /  CVV:

*I authorize the Arkansas Education Association or its designated local to charge my credit/debit card or checking/savings account, as provided above, for annual dues. I further authorize those payments to be made through the initial membership year ending August 31 and recurring annually thereafter, payable in monthly installments on or around the 20th day of each month, beginning in the amounts set forth below. I understand that the final installment amount for the membership year may include a residual amount, not to exceed \$1.00, representing the sum that cannot be evenly distributed among the installments.*

*I understand that if the governing bodies of NEA, the Arkansas Education Association, and/or my local change the amount of annual dues, the Arkansas Education Association or local will notify me in writing not less than 10 days before processing any changes to the amount described in the payment summary. Following that notice, I authorize the Arkansas Education Association or local to adjust the amount to be charged or debited by adjusting my payments equally over the payment schedule.*

*I understand that this authorization continues year-to-year and shall remain in effect until the earlier of: 1) the termination of my eligibility to maintain membership in the Association; or 2) my written notice to terminate this authorization, which must be sent to via email to [rpipkins@aeanea.org](mailto:rpipkins@aeanea.org) or to our office via AEA Membership, 1500 West Fourth Street, Little Rock, AR, 72201-1064, and include my name, address, employer, and membership number. I understand that termination of this authorization will take effect 7 days after receipt by the Arkansas Education Association.*

## ANNUAL DUES (NEA, AEA)

Total Annual Amount

\$

Monthly amounts might differ based on payment method or local dues schedules. Once your membership gets processed, exact payment amounts will be sent.

SIGNATURE:

DATE: