



New Mexico Highlands University

Faculty Association

Membership Application

NMHU Faculty Association \$51 NMHU Staff Association \$1.00 \$20,001 and below \$5.00 \$30,001 - 45,000 \$10.00 \$45,001-55,000 \$11.00 \$55,001 - 60,000 \$11.00 \$55,001 - 60,000 \$11.00 \$60,001-65,000 \$13.00 \$65,001 - 70,000 \$13.00 \$65,001 - 70,000 \$14.00 \$70,001 - 75,000 \$15.00 \$75,001 and above \$16.00 Total Dues	
Local Dues (Based on Salary Level) Check line: \$20,000 and below	7.23
\$20,000 and below \$20,001—30,000 \$30,001—45,000 \$45,001-50,000 \$50,001—55,000 \$55,001—60,000 \$60,001-65,000 \$60,001-65,000 \$65,001—70,000 \$70,001—75,000 \$75,001 and above Last Name (print) First Name Text MI Home Address PO BOX City State Zip Home Phone Work Phone Email	
\$20,001—30,000	
\$30,001—45,000 \$45,001-50,000 \$50,001—55,000 \$55,001—60,000 \$55,001—60,000 \$66,001-65,000 \$65,001—70,000 \$70,001—75,000 \$75,001 and above Total Dues Last Name (print) First Name Text MI Home Address PO BOX City State Zip Home Phone Work Phone Email	
\$45,001-50,000	
\$50,001—55,000 \$55,001—60,000 \$60,001-65,000 \$60,001-65,000 \$70,001—75,000 \$70,001—75,000 \$75,001 and above Last Name (print) First Name Text MI Home Address PO BOX City State Zip Home Phone Work Phone Email	
\$55,001—60,000 \$ 60,001-65,000 \$ 65,001—70,000 \$ 70,001—75,000 \$ 75,001 and above Last Name (print) First Name Text MI Home Address PO BOX City State Zip Home Phone Work Phone Email	
\$ 60,001-65,000	
\$65,001 –70,000 \$70,001 —75,000 \$75,001 and above \$15.00\$16.00	
\$70,001—75,000 \$75,001 and above \$15.00\$16.00	
\$75,001 and above\$16.00 Total Dues Last Name (print) First Name Text MI Home Address PO BOX City State Zip Home Phone Work Phone Email	
Last Name (print) First Name Text MI Home Address PO BOX City State Zip Home Phone Work Phone Email	
Last Name (print) First Name Text MI Home Address PO BOX PO BOX City State Zip Home Phone Work Phone	
Home Address	
Home Address	
City State Zip Home Phone Work Phone Email	
Work Phone Email	
Work Location Job Title	
SSN	
ELECTRONIC FUND TRANSFER INFORMATION ONLY:	
Bank Branch	
Transit Number	
Account Number	
ATTACH VOIDED CHECK OR DEPOSIT SLIP	
The undersigned employee of NMHU hereby agrees to pay in bank fund transfer as designated above the dues as established pliance with the Local's constitutional provisions and, if applicable, with procedures established by my Local with my employer. tinue unless revoked in writing by me to my Local no later than 30 days prior to the effective date of revocation. Dues paid to A deducted for Federal Income Tax purposes; however, under limited circumstances dues may qualify as a business expense.	Deductions will con
Date Signature	