ASEA Annual Membership Application

CREDIT/DEBIT

www.asea.org

110 N. Jackson St., Montgomery, AL 36104 ★ (334)834-6965 ★ Fax: (334)834-4904 ★ Email: membership@asea.org

- ❑ Lump sum annual dues $116.28. Check must accompany membership application. Please make check payable to ASEA.
- ❑ Bank Draft ($9.69 per month/$116.28 annual) ❑ Credit Card ($9.69 per month/$116.28 annual)
- ❑ Check here if you are a contract employee. (Lump sum dues must accompany application).

Chapter: _____

Recruiter: _____ Recruiter's ASEA Membership ID #: _____

Name (Mr. /Ms.) _____

Soc. Sec. No. _____ Date of Birth: ____ /____ /____

Home Address _____ City _____ , AL ZIP _____

Dept. _____ Work Address _____

Cell (C) _____ Work (W) _____ Home(H) _____

E-mail (H) _____ E-mail (W) _____

Beneficiary's Name ** _____ Relationship _____

** (Upon membership, you receive a $5,000 Accidental Death and Dismemberment Insurance Policy at no additional cost)

By signing this application, the applicant gives express permission to ASEA, its subsidiaries and affiliates, and affiliated vendors to send to applicant information and advertisements by, but not limited to, the following means: cellular, facsimile, email, US mail, or private courier. Data & messaging rates apply. Dues are subject to change.

X _____
Signature

Debit Authorization Form

I (we) hearby authorize Alabama State Employees Association (ASEA) to initiate entries to my (our) checking/savings accounts at the financial institution listed below and, if necessary, initiate adjustments for any transactions debited in error. Dues are subject to change.This authority will remain in effect until ASEA is notified by me (us) in writing to cancel it in such time as to afford ASEA and THE FINANCIAL INSTITUTION a reasonable opportunity to act on it.

Name of Financial Institution _____ Date _____

Signature _____

Name (Print) _____

Dues Withdrawn $9.69 per month or $116.28 annual (please circle)

Financial Institution Routing Number

_____

Checking/Savings Account Number

_____

These numbers are located on the bottom of your check as follows:

example: ⑆ 123456789 ⑆ 1234567890123 ⑈
ROUTING NUMBER ACCOUNT NUMBER

- ❑ Visa ❑ MasterCard ❑ AmEx ❑ Discover
- ❑ $9.69 month ❑ $116.28 annual

Name on Card _____

Card # _____

Exp. Date _____ Security Code _____
MM/YR

X _____
Signature

(Please keep application in one piece. Do not tear apart.)

1

Fold This Panel First And Follow Tape Placement Instructions.

1”

Overlap 2 Tape Pieces to Make 1”

Apply Clear Tape
Left and Right To
Secure Open Edge.
DO NOT STAPLE

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 656 MONTGOMERY AL

POSTAGE WILL BE PAID BY ADDRESSEE

ALABAMA STATE EMPLOYEES ASSN
110 N JACKSON ST
MONTGOMERY AL 36177-9727

Fold This Panel Second

2

ASEA
ALABAMA STATE EMPLOYEES ASSOCIATION©

Join the ONLY
Association that promotes &
protects State Employees...
Apply Today!

www.asea.org * www.asea.org * www.asea.org * www.asea.org