

2010 Membership Application

International Association of Workforce Professionals

Ohio Chapter

Please accept my application for membership in the International Association of Workforce Professionals. I understand that this application is for the Ohio Chapter and the International Association covering the calendar year 2010 (Jan. through Dec.). **(Let us know whether you want your newsletter e-mailed to work, home or both!)**
BONUS: If you submit this application early, your subscription to Workforce Professional starts immediately!

Name _____

Home Address _____

Home Phone _____ Cell or Alternate Phone: _____

Home E-mail address _____ Send my copy of the *Cardinal* newsletter to this address

Work E-mail address _____ Send my copy of the *Cardinal* newsletter to this address

Employer / Division _____

Worksite Address _____

Business Phone _____

Signature _____ Date _____

Who may we thank for inviting you to join? _____

Membership Type

- Regular Member \$60 Check here if renewal.
 Retiree Member \$30 Check here if renewal.

Payment Type (Check only one.)

- Visa
 Mastercard

Card Number: (xxxx xxxx xxxx xxxx)

| | | | |
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Expiration Date: (mm yy)

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- Check (Payable to Ohio IAWP)

Payroll Deduction options:

Note: ODJFS employees may send the attached *Authorization for Payroll Deduction* to their payroll officer by faxing to:

ODJFS Payroll & Benefits Section Fax: (614) 995-7048

- Payroll Deduction (State of Ohio Employee), **sent by December 31, 2009** (effective 1/15/2010)

I made sure my Payroll Officer received my Payroll Deduction Form before December 31 with instructions to withhold \$2.50 per pay period effective with the first pay period in January. **I enclose no money!**
(I have read and agree with the terms listed below.)

- Payroll Deduction (State of Ohio Employee), **sent during 2010**

I have submitted the appropriate payroll deduction form (\$2.50 per pay period) to my payroll officer am attaching payment to this application for the portion of this year's dues not covered by the deduction. (Use table attached to the payroll deduction card.)
I understand that my membership will automatically be renewed each year unless I inform the Treasurer not to renew by the end of January. **If I do not contact the Treasurer by January 31 to cancel my membership, I agree to pay any dues balance for that year not completely paid by payroll deduction.** (For example, if I or the agency terminates payroll deduction prior to the end of the year.)

Mail the completed form and any payments to:

N. Dais, Treasurer, Ohio IAWP, 3132 Escott Avenue, Toledo OH 43614

AUTHORIZATION FOR PAYROLL DEDUCTION

Employee Name _____ Social Security Number _____
 Last First Middle

I hereby authorize the State of Ohio to make the following Deduction from my earnings:

New Authorization Change Cancellation Do Not Wish to Enroll

- Medical Insurance (Complete Health Care Form) Single Family
- Insurance
- Charity Pledge
- Union Deduction
- Credit Union (Complete Credit Union Membership Form)
- City Income Tax
- Savings Bonds (Complete US Savings Bond Card)
- Other **Intl. Assn. of Workforce Professionals (IAWP) Member Dues**

DEDUCT: % or Amount **\$2.50 from the** Effective Date _____
first 2 pay periods of each month.

PAYABLE TO: **OHIO CHAPTER IAWP** Deduction Code **NAP**

Employee Signature _____

| | |
|------------------------|--|
| PAYROLL OFFICER | |
| PAYROLL NUMBER _____ | |
| WORK LOCATION _____ | |
| DATE _____ | |
| SIGNATURE _____ | |

OD-X 15936-0F

Payroll Deduction Payment Option for State of Ohio Employees
IAWP Membership Dues for 2010

(ODJFS Employees may FAX this *Authorization for Payroll Deduction* to Payroll at (614) 995-7048)

State employees may use payroll deduction to pay for their yearly dues.

\$2.50 will be deducted from the first two pay periods of each month equaling 24 payments each year.

Your membership for 2010 is \$60, therefore if you start your payroll deduction later than the first pay check in January, you must pay what your payroll deduction does not cover.

Use the following chart to determine how much to send to the Treasurer with your application:

1. Complete, sign and submit the payroll deduction form (above) to your Payroll Officer.

2. Send your Membership Application & Payment (if any)

(If you get your payroll deduct form to your payroll officer before 12/23/2004, no payment is needed)

to:
N. Dais, Treasurer
Ohio IAWP
3132 Escott Avenue
Toledo OH 43614

| Submit your <i>Authorization for Payroll Deduction</i> so that your Payroll Officer receives it by... | ...with an effective date no later than.... | .. and send this amount with your application |
|---|---|---|
| 12/31/2009 | 1/15/2010 | \$0.00 |
| 1/15/2010 | 1/29/2010 | \$2.50 |
| 1/29/2010 | 2/12/2010 | \$5.00 |
| 2/12/2010 | 2/26/2010 | \$7.50 |
| 2/26/2010 | 3/12/2010 | \$10.00 |
| 3/12/2010 | 3/26/2010 | \$12.50 |
| 3/26/2010 | 4/9/2010 | \$15.00 |
| 4/9/2010 | 4/23/2010 | \$17.50 |
| 4/23/2010 | 5/7/2010 | \$20.00 |
| 5/7/2010 | 5/21/2010 | \$22.50 |
| 5/21/2010 | 6/4/2010 | \$25.00 |
| 6/4/2010 | 6/18/2010 | \$27.50 |
| 6/18/2010 | 7/2/2010 | \$30.00 |
| 7/2/2010 | 7/16/2010 | \$32.50 |
| 7/16/2010 | 7/30/2010 | \$35.00 |
| 7/30/2010 | 8/13/2010 | \$37.50 |
| 8/13/2010 | 8/27/2010 | \$40.00 |
| 8/27/2010 | 9/10/2010 | \$42.50 |
| 9/10/2010 | 9/24/2010 | \$45.00 |
| 9/24/2010 | 10/8/2010 | \$47.50 |
| 10/8/2010 | 10/22/2010 | \$50.00 |
| 10/22/2010 | 11/5/2010 | \$52.50 |
| 11/5/2010 | 11/19/2010 | \$55.00 |
| 11/19/2010 | 12/3/2010 | \$57.50 |