

**MORTON COLLEGE FACULTY ASSOCIATION**  
**Local No. 1600, American Federation of Teachers**  
**208 W. Kinzie Street, Chicago, Illinois 60654**

**MEMBERSHIP APPLICATION AND PAYROLL DUES DEDUCTION AUTHORIZATION**

TO THE BOARD OF TRUSTEES OF COMMUNITY COLLEGE DISTRICT NO. 527:

I hereby authorize and direct the Board of Trustees of Community College District No. 527 through its officers, agents, and employees, to deduct from the portion of any salary due me each month the amount as certified by the Cook County College Teachers Union at the current rate of dues. Such deduction is to start immediately after the date of this authorization.

I further authorize and direct you to transfer and pay such sum so deducted to the Treasurer of the Cook County College Teachers Union, 208 W. Kinzie Street, Chicago, Illinois 60654.

In consideration of the above described service rendered by the Board of Trustees of Community District No. 527, its members, officers, agents and employees, the undersigned hereby releases and discharges the Board of Community College District No. 527, its members, officers, agents and employees of and from any and all liability whatsoever arising as a result of the authorization herein given.

This authorization is revocable by me upon thirty (30) days written notice prior to March 1, or October 1 of any year, to the Cook County College Teachers Union and the Board of Trustees of Community College District No. 527, the revocation to become effective March 1 or October 1 of that year, or upon termination of my employment. It is understood this service shall be limited to deduction to one employee organization for any individual employee, and that no partial deductions will be made.

Dues paid to the Cook County College Teachers Union may not be deductible for federal income tax purposes: however, under limited circumstances, dues may qualify as a business expense.

\_\_\_\_\_  
Union Representative

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Effective Date

\_\_\_\_\_  
Home Phone Number

\_\_\_\_\_  
Position Title

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Personal E-mail

Mr./Mrs./Ms. \_\_\_\_\_  
Last Name First Middle (Print)

\_\_\_\_\_  
Street Address City State Zip

Affiliations American Federation of Teachers, Illinois Federation of Teachers, Chicago Federation of Labor, Illinois Federation of Labor, and American Federation of Labor - CIO