



MEMBERSHIP APPLICATION

STATE EMPLOYEES ASSOCIATION OF NORTH CAROLINA

Preferred SEANC District (optional)

County of Residence

County of Work (if different from residence)

Member Information

Social Security Number (Required)

Last Name

Full First Name, Middle Initial

Date of Birth Male Female

Street/P.O. Box/Apt. Number

City/Town

State Zip Code

Contact Information

Home Phone

Work Phone

Cell Phone

Email Address (personal)

Email Address (work)

Employment Information

Job Title/Profession

Department/Agency/School (required for payroll deduction)

Membership Type (check one)

Active Retired Associate* Affiliate**

* Associate membership is available to employees of the State Employees' Credit Union or SEANC staff.

** Affiliate membership is available to those persons or organizations who support the purposes of SEANC.

Employer

State Temporary/Part-time Local Gov't: _____

Type of Employment

10 months 11 months 12 months other _____

Monthly Cost

\$17 per month for active state employees*

\$13 per month for retired state employees*

* Includes \$14 per month membership for active state employees (or \$10 per month for retirees) and \$3 per month voluntary Employees Political Action Committee (EMPAC) contribution.

The EMPAC contribution may be declined now by checking this box or may be canceled at any time with one month's written notice to the SEANC Central Office. If you desire to contribute a different monthly amount to EMPAC, indicate your total monthly EMPAC contribution here \$_____. North Carolina law requires EMPAC to report the name, address, occupation and employer of individuals whose contributions exceed \$50 in a calendar year; contributions are limited to \$5,000 per individual per election cycle.

Payment Options Choose One

A. Payroll/Pension Deduction

B. EFT Bank Draft

Name of Financial Institution

9-digit Routing Number

Checking Account Number

I, the undersigned, hereby authorize SEANC membership dues to be deducted from my wages/pension or checking account on a monthly basis, in such amounts as are currently established pursuant to the SEANC Bylaws, or in such adjusted amounts as may be approved by the membership subsequent to the date of this authorization. I further hereby authorize my employer to deduct voluntary EMPAC contributions in the amount designated above from my wages/pension on a monthly basis for transmittal to SEANC in a lump sum with my SEANC dues. These authorizations shall continue until canceled by me by written notice to the SEANC Central Office. The payments so deducted are non-refundable. SEANC membership dues and contributions to EMPAC are not deductible as charitable contributions for federal or North Carolina income tax purposes.

I understand that: 1) I am not required to make contributions to EMPAC as a condition of my employment by my employer or membership in SEANC; 2) I may refuse to contribute without any reprisal; 3) only members and executive/administrative staff who are U. S. citizens or lawful permanent residents are eligible to contribute; 4) the amounts on this form are merely a suggestion, and I may contribute more or less by this or some other means without fear of favor or disadvantage from SEANC or my employer; 5) SEANC and SEIU use the money they receive for political purposes, including, but not limited to, addressing issues of political or public importance and contributing to and spending money in connection with federal, state and local elections.

Signature

Date

Recruited by (print name/ID number) (optional)

Please contact me with more information about SEANC's insurance programs:

- | | | | | | |
|---|---|---------------------------------------|---|--|--|
| <input type="checkbox"/> Accident | <input type="checkbox"/> Auto | <input type="checkbox"/> Dental | <input type="checkbox"/> Hospital Confinement | <input type="checkbox"/> Life (Term, Universal, Whole) | <input type="checkbox"/> Pet |
| <input type="checkbox"/> Accidental Death and Dismemberment | <input type="checkbox"/> Cancer | <input type="checkbox"/> Disability | <input type="checkbox"/> Identity Theft | <input type="checkbox"/> Long-Term Care | <input type="checkbox"/> Short-Term Disability |
| | <input type="checkbox"/> Critical Illness | <input type="checkbox"/> Home/Renters | <input type="checkbox"/> Legal | | <input type="checkbox"/> Vision |

Mail applications to:

State Employees Association of North Carolina • 1621 Midtown Place • Raleigh, N.C. 27609



STATE EMPLOYEES ASSOCIATION OF NORTH CAROLINA

JOIN SEANC

The nation's leading state employees association, 50,000 members strong, fighting for your pay, health care and retirement benefits in and outside of the General Assembly!

Strength

Why join SEANC? SEANC is the leading organization advocating for state employees and retirees where you, the member, determines the association's priorities. Make the choice today to empower yourself and the public services you provide and make your voice heard!



By joining SEANC you get more than a membership card. You get a team of advocates in the halls of the General Assembly, before the State Health Plan Board of Trustees and at the Teachers' and State Employees' Retirement System who seek to improve your quality of life.

Action

Our priorities are public services and the people who provide them:

- Pay raises for all state employees
- Maintaining affordable health care options
- Fully funding the retirement system
- Maintaining worker rights
- Halting privatization



Results

SEANC has secured the following benefits for state employees in recent years:

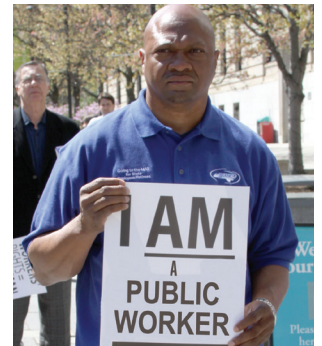
- Saved jobs
- Secured pay raises and bonuses
- Blocked DOT and DPS privatization efforts
- Maintained a defined-benefit retirement plan
- Blocked proposed cuts to State Health Plan spousal coverage and the 80/20 plan

Benefits

SEANC employs full-time retirement and State Health Plan experts who stand ready to answer your questions.

Keeping You Informed

Members receive a weekly email newsletter with an insider's view on state government as well as a newsletter, *The Reporter*, published six times a year. SEANC also has an active presence on Facebook and Twitter and a text messaging program for alerts.



Insurance

- \$1,000 Accidental Death and Dismemberment insurance for all members
- Up to \$150,000 in term-life coverage available within the first 180 days of membership without medical examination
- Special group rates on Auto, Dental, Home, Life, Long-Term Care, Pet, Vision and more

Discounts

- Member discounts at more than 3,000 businesses and featured attractions
- Discount ticket program for admission to theme and water parks in N.C. and beyond

Purchasing Power

- SEANC members have a better way to pay for popular big-ticket items like home furnishings, electronics and more in zero-interest installments

Educational Opportunities

- More than \$120,000 in college scholarships available each year to members and dependents



www.SEANC.org

facebook.com/seanc.local2008

Twitter: @seanc2008

Find Out More!

SEANC Central Office

1621 Midtown Place

Raleigh, N.C. 27609

Phone: 919-833-6436

Email: members@seanc.org