

2009 CEA-NEA EARLY ENROLLMENT AGREEMENT

THIS FORM MUST BE SIGNED BY THE EARLY ENROLLEE AND THE LOCAL PRESIDENT. THE LOCAL MUST SUBMIT THE ORIGINAL SIGNED FORM WITH THE ORIGINAL SIGNATURES OF THE EARLY ENROLLEE AND THE LOCAL PRESIDENT.

1. As a participant in the 2009 Early Enrollment Program of the _____
(print the full name of your local association, do not abbreviate) and the Colorado and National Education Associations, I am eligible to receive access to (A) coverage under **the NEA Educators Employment Liability Program (EEL)** for incidents which occur AFTER the date of my enrollment in this Early Enrollment Program but not before April 1, 2009 and (B) access to six NEA Member Benefits Programs: **A+ Auto & Homeowners Insurance, Credit Card Program, the Rental Car Plan, Magazine Subscription Program, Term Life Insurance, and Accidental Death & Dismemberment Insurance.**
2. As a condition of eligibility for this benefit, I agree to pay the appropriate unified Active membership dues for the 2009-10 membership year beginning September 1, 2009, in accordance with the regular dues payment procedures for my Local Association. Should I fail to do so, my eligibility for benefits under the NEA Educators Employment Liability Program (EEL) will terminate immediately and, in addition, I will be liable for the cost of any benefits that were provided to me under the NEA Educators Employment Liability Program (EEL) prior to September 1, 2009.
3. The appropriate unified Active membership dues for the 2009-10 membership year will be explained to me by a representative of my Local Association named above. These unified dues will include dues payable to the local, the appropriate UniServ Unit, and the Colorado and National Education Associations. I understand that there will be a small increase in the dues for 2009-10 in accordance with the local, state and national association's rules and bylaws. I further understand that I have the right to be informed of the new dues as soon as my Local Association is aware of the sum.
4. The Early Enrollment Program is available only to individuals who are joining the Association as **FIRST TIME ACTIVE MEMBERS** for 2009-10. If you have been an NEA member before, you are not eligible for this program. Early Enrollees are considered nonmembers until September 1, 2009 although they may participate in the NEA Member Benefits listed in (1) above and they are also eligible for the NEA Educators Employment Liability Program (EEL) immediately.

PRINT LEGIBLY IN BLACK INK

Date _____

Your Full Name _____

Street Address _____

City, State and Zip _____

Home E-mail Address _____

Your Signature _____

Signature of Your Local Association President _____

----- **DO NOT WRITE BELOW THIS LINE** -----

CEA will mail information about the Liability Insurance and Member Benefits programs to all Early Enrollees in June 2009.

NOTE TO UNISERV UNIT: Please return this ORIGINAL Agreement to Kallie Benjamin with one copy of the original CEA-NEA Membership Form or original Unit membership form. Keep one copy of Membership Form. DO NOT send CEA the payroll deduction form.

-- THIS FORM MAY BE DUPLICATED --