

**UNITED SCHOOL EMPLOYEES OF PASCO**

EMPLOYEE ID	PRINT NAME (LAST NAME, FIRST NAME)	WORKSITE	JOB TITLE	
ADDRESS		CITY	STATE	ZIP CODE
( ) -	PERSONAL E-MAIL ADDRESS (not your @pasco.k12.fl.us email)		<b>For USEP Use Only</b> Date Received: _____  Sent to District: ___/___/___ MS: ___/___/___ MP: ___/___/___	
HOME PHONE				
<b>USEP CONTINUING MEMBERSHIP APPLICATION</b> <input type="checkbox"/> <b>PAYROLL DEDUCTION</b> I authorize the District School Board of Pasco County to deduct membership dues from my paycheck to be remitted to the United School Employees of Pasco. I understand that I may terminate these deductions at any time by officially notifying USEP in writing and following revocation process.  _____ Signature Date				
<input type="checkbox"/> <b>CASH PAY</b>				
<b>IRS TAX DISCLOSURE REQUIREMENT</b> Dues paid to United School Employees of Pasco may not be deductible for federal income purposes; however, under limited circumstances, dues may qualify as a business expense.				

Recruiting Member (please print)

**PLEASE PRINT CLEARLY AND RETURN THROUGH THE COURIER**