

Regular membership is available to:

California employees in a district or other educational agency designated or functioning as:

- Management employees
- Members of the management team
- Administrators with regular part-time teaching responsibilities
- Confidential employees, classified or certificated supervisory employees

(No person shall be eligible for Regular Membership who is represented by an exclusive bargaining representative, except for certificated supervisory and classified supervisory employees whose positions have previously been designated by the employer as management or who are functioning as management.)

Connect with us!

Get connected to educational leaders across the state through ACSA's myriad social media offerings or visit us at www.acsa.org

Professors of Education

Employees of the California Department of Education (CDE) or Commission on Teacher Credentialing (CTC)



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 132 BURLINGAME, CA

POSTAGE WILL BE PAID BY ADDRESSEE

ASSOCIATION OF CALIFORNIA SCHOOL ADMINISTRATORS
MEMBER SERVICES DEPARTMENT

1575 BAYSHORE HIGHWAY
BURLINGAME, CA 94010-9987



2019-2020

Regular Membership Application



association of california
school administrators

Here's what's in it for you!

- **Free Professional Liability Insurance and \$10,000 Accidental Death Insurance!**
- Invaluable legal assistance for work-related concerns. Access to veteran administrators knowledgeable about the Educational Codes and your due process rights.
- Continued learning opportunities for brand new and seasoned leaders. Skills training on the latest trends and hot topics in education.
- Timely award-winning publications that keep you informed about issues and resources throughout the state and the nation.
- Professional connections with colleagues throughout the state. An established and growing network of leaders with savvy and practical advice for every situation.
- A strong lobbying voice for school administrators and timely electronic legislative alerts.
- Hot jobs delivered to you through weekly issues of *EdCa!*. Jobs are also available right at your fingertips at www.acsa.org
- National and state awards and recognition.
- Exceptional member benefits that save you time and money.

Plus... You are eligible for membership in ACSA's national affiliates.

When you join acsa...

You are immediately covered by:

Free Professional Liability Insurance and \$10,000 Accidental Death Insurance
(Regular members only)

You are also eligible for all member benefits including:

- In-depth reporting and features through *EdCal* and *Leadership Magazine*
- Timely news and practical information from ACSA News online, at www.acsa.org
- Reduced registration to the Leadership Summit.
- Life, accident, disability and cancer insurances
- Auto/homeowners and personal umbrella liability coverage
- Discount purchasing

local representation

ACSA's Membership Recruitment Team provides assistance to region leaders and region membership chairs in developing goals and identifying non-members in districts within their service areas. The Membership Recruitment Team also promotes the value of ACSA membership to all administrators and to those new and aspiring. They are available for presentations on member benefits and services and are a tremendous resource of information. To find out how you can contact your local Membership Recruitment Team member, please call the Member Services Department at 800.608.ACSA or email memberservices@acsa.org.

Please detach and retain for your records.

2019-2020 regular membership application

First Name _____ M.I. _____

Last Name _____

Position/Title _____

Last Four Digits of Social Security Number _____

business

District _____

School _____

Address _____

City _____ State _____ ZIP _____

() ()

Work Phone _____ Extension _____

Work Email Address _____

Personal Email Address (Required) _____

Check here if you do not wish to receive ACSA email at your work email

home

Address _____

City _____ State _____ ZIP _____

() ()

Home Phone _____ Cell Phone _____

Opt-in to receive text messages from ACSA.

Preferred Mailing Address Home Work

Check here if you wish to view ACSA publications online only.

For further details, call the ACSA Member Services Department at 650.692.4300 or 800.608.ACSA(2272) Fax 650.437.9189 • Email memberservices@acsa.org

2019-2020 dues

Dues prorated for the number of months remaining in the school year for members joining after July 2019. SRC: _____

Annual salary as of June 30, 2019	\$ _____
Dues calculation	x.0090
ACSA dues amount (maximum \$1,525)	\$ _____
ACSA PAC*	+\$78.00
Total ACSA dues	\$ _____

*Check here if you do not wish to contribute \$78 to ACSA's Political Action Committee.

Referred By (please print one name only) _____

Contributions to support ACSA's political activities are not tax deductible. ACSA retains sole discretion over use of member political contributions. Dues may be deductible as business expenses. ACSA estimates that the non-deductible portion of dues allocable to lobbying is 13.3 percent.

Check below to become a member in one of ACSA's official affiliates.

- CA Association of African American Superintendents/Administrators (CAAASA) . . . \$500 (Supt.)/\$100 (Other Admin)
- National Association of Elementary School Principals (NAESP) . . . \$235
- National Association of Secondary School Principals (NAASP) . . . \$250

Subtotal Affiliate Dues \$ _____

payment options

SELF PAY (select one)

Payroll deduction*



Signature (required for payroll deduction)

*I agree that my dues will be deducted by my payroll office. This authorization shall be in effect until revoked by written notice from myself or ACSA. I consent to the adjustment of such deduction to reflect any change in the dues of which the payroll office may be advised by the organization.

- Three equal installments (Enclose first payment. Not offered after September 2019.)
- MasterCard/Visa (full payment only) Check (full payment only)

Card Number _____ Exp. Date _____

Signature (required for credit card charge) _____ Date _____

DISTRICT/COUNTY OFFICE PAYS

If choosing this option, send form to district for authorization and payment. This section must be completed by district or county office.

Please indicate:

- ACSA Dues (excluding \$78 PAC) Affiliate Dues
- District P.O. or check enclosed
- Bill district monthly

Authorizing party (please print) _____

() _____

Phone number _____

Email Address _____

your job classification

- Certificated management and supervisory
- Certificated management & teacher (dues based on admin salary)
- Classified management and supervisory
- Confidential as recognized under EERA
- CDE or CTC (Associate Membership optional)
- Professor of Education (Associate Membership optional)
- Charter School Administrator
- Other

Are you represented by an exclusive bargaining representative?

Yes No

The information requested below will remain confidential and will be used for ACSA purposes only and will not be sold to vendors or any third parties.

year of birth

Decline to State

gender

Male Female

orientation

LGBT

education level

Master's Degree Doctorate

Other

ethnicity

- American Indian or Alaska Native
- Chinese
- Japanese
- Korean
- Vietnamese
- Asian Indian
- Laotian
- Cambodian
- Other Asian
- Hawaiian
- Guamanian
- Samoan
- Other Pacific Islander
- Filipino
- Hispanic or Latino
- African American, not of Hispanic origin
- White, not of Hispanic origin
- Decline to State

social media

Facebook Instagram

Twitter handle _____