

## **NON-MEMBERS:**

(Fee Payers)

The law that deals with “agency shops” says that an agency fee objector must **actively request** that their fees not be used for non-chargeable expenses. So if you don’t complete the “Agency Fee Rebate Request” form, you will pay the chapter membership dues amount (minus the SBUT/PAC contribution), but will not be eligible for membership services or protections. In October you will receive a “Hudson Notice” packet that will give you another opportunity to request a rebate of non-chargeable expenses for the full year. The rebate amount is determined by an independent arbitrator.

### **AGENCY FEE REBATE REQUEST FORM**

If you do not complete an enrollment form, you are an “Agency Fee Payer.” In mid-October, you will receive a “Hudson Notice” from CTA which is a packet that includes information about the Agency Fee law, along with the opportunity to request a rebate of the “non-representational expenses” included in the agency fee.

We are including here the same form. If you do not wish to join the union, we suggest that you complete and return this form to us. We will forward it to CTA.

**It is in your interest to return one of the two forms (union enrollment form, or agency fee rebate form). If not, you will be a fee payer, but you will not be eligible for membership services or protections, and you will be paying the same as a member.**

The Rebate Request form usually comes with the Hudson notice, so the section about challenging the amounts of the arbitration won’t make sense until you get the financial information from CTA in October. We will hold onto your form until October when CTA requires it, so if you would like to revise it at that time, you may.

Please call the office if you have any questions: (310) 921-2500.

**2010-2011  
AGENCY FEE REBATE/ ARBITRATION REQUEST FORM**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Last 4 digits of Social Security Number: \_\_\_\_\_

School District \_\_\_\_\_

Local Association \_\_\_\_\_  
(Full Local Name)

I request a rebate of the nonchargeable portion of my fees.

I wish to challenge the following in an arbitration hearing  
(check only those calculations you actually wish to challenge):

- Local Association's calculation
- CTA's calculation
- NEA's calculation

Initial here if you have no objection to providing your name and address to any other Fee objector who seeks the identities of other Fee Objectors for purposes related to the upcoming arbitration case. Such a requesting Fee Objector is required to agree in writing in advance that no party or representative of any party in this case shall use, or permit or enable the use of, the names and addresses of Fee Objectors in these proceedings for any purpose not immediately and directly related to this arbitration.

Send completed form to:

Agency Fee Rebate  
CTA Membership Accounting  
P.O. Box 4178  
Burlingame, CA 94011-4178

**FOR OFFICE USE ONLY**

Indiv ID# \_\_\_\_\_

PR Ded \_\_\_\_\_

Category \_\_\_\_\_

Date: \_\_\_\_\_

Initial \_\_\_\_\_