

**Rider University Chapter
American Association of University Professors
2083 Lawrenceville Road – Memorial Hall Room 307
Phone: 609-896-0092 Fax: 609-896-1837
e-mail: aaup@rider.edu Webpage: <http://www.rideraaup.net>**

Dues/Representation Costs Deduction Authorization Form

To be eligible for dues deductions please return both the membership and dues authorization form to the AAUP Office, Mem Hall 307 for processing by October 1 for full-time faculty and November 1, for adjunct faculty. For spring, please return by March 1.

TO: Supervisor, Payroll Department
Rider University
Lawrenceville, New Jersey 08648

I authorize and direct Rider University to deduct from my wages in my present or in any future employment by you such sums as AAUP Rider University Chapter may certify as due and owing from me as dues, including an initiation or reinstatement fee, assessments, and monthly dues in such sums as may be established from time to time by said Chapter. I authorize and direct you to deduct such amounts from my pay to remit same to the AAUP Rider University Chapter at such time and in such manner as may be agreed upon by you and the Chapter at any time while this authorization is in effect.

The assignment, authorization, and direction shall take effect as of the date hereof and shall be irrevocable for the period of one year from the date of delivery hereof to you, or until the termination of the collective bargaining agreement between Rider University and the Chapter which is in force at the time of delivery of this authorization, whichever occurs sooner, and I agree and direct that this automatically renewed and shall be irrevocable for successive periods of one year each, or for the period of each succeeding applicable collective bargaining agreement between my employer and the Chapter, whichever shall be shorter, unless written notice is given by me to my employer and the Chapter not more than twenty (20) days and not less than ten (10) days prior to the expiration of each period of one year, or of each collective bargaining agreement between my employer and the Chapter, whichever occurs sooner.

Dues, fees and assessments to AAUP Rider University Chapter are not deductible as charitable contributions for federal tax purposes.

DATE: _____ Bronc ID# (preferred) _____

Signed: _____ Social Sec.#:(alternate) _____

Print: _____