

**Ohio Education Association
2024-2025
Membership Update Form**

Local Association Name: _____ Local User ID: _____ Date: _____

Preparer: _____ Phone Number: _____ E-Mail Address: _____

This form cannot be used for enrolling new members. An enrollment form is required to be completed and signed by new members.

Section I. Membership Type or Status Updates (i.e., Educator to Education Support Professional, or vice-versa, Full-time to Half-time, Half-time to Quarter-time, etc.).

ID Number	FULL NAME	Effective Dates of Current Membership Type		Effective Dates of New Membership Type		DESCRIPTION
0009876543	BOBBY SMITH	9/1/20XX	11/30/20XX	12/1/20XX		Half-time to Full-time Beginning 12-1-20XX (EXAMPLE)

Section II. Member Personal Information Updates (i.e., name, address, non-work e-mail, and non-work phone).

ID Number	FULL NAME	New Personal Information
0006315795	June Miller	Change Name & Address to June M Wilson, 123 Anywhere St., Some Town, OH 44444 (EXAMPLE)

Return to:

Mail:

OEA Membership Department
225 East Broad Street
Columbus, Ohio 43215

Electronic Scan:

Membership@ohea.org

Local Association Name: _____ Local ID _____

Section III. Cancellations: Individuals are obligated to pay the full year's dues. Please confirm the collection of the full year's dues by writing the amount collected in Column E below along with the Individual's ID Number, Full Name, Effective Date, and Reason for Cancellation.

If the individual to be cancelled paid their dues obligation in cash, write "cash" in Column E. The local association is in no way obligated to refund any portion of a cash payment.

Column A	Column B	Column C	Column D	Column E
ID Number	Full Name	Effective Date	Reason for Cancellation	Amount Collected * (Do Not Include Local Dues)

*If the local was unable to collect full dues, utilize the steps below to assist you in calculating the appropriate amount to report in column E for each individual. *(If less than full dues obligation is collected, a reason is to be provided as to why a lesser amount was collected by local.)*

If the total amount of dues collected is not provided for each cancellation, the Membership Department will contact you to obtain the information. The local will continue to be billed 100% of dues until the information is provided.

Remember, membership dues have two components, the portion that is kept by the local and the portion that is sent to OEA.

Step One – Calculating the Portion kept by the local:

(1) Enter the **Annual Local Dues** for this Local based on the individual membership type _____

(2) Enter **Total Number of Payroll Deductions** for the year _____

(3) Divide **Annual Local Dues (1)** by **Number of Payroll Deductions (2)** and enter here _____ **This is the amount of Local Dues Deducted Per Pay**

(4) Enter **Number of Payroll Deductions Completed** for the individual including final pay or anticipated final pay _____

(5) Multiply amount in box (3) by number in box (4) and enter here in box (5) _____ **This is the Total amount of Local Dues Collected**

Step Two –Calculating the Portion sent to OEA:

(6) Enter Total Amount of dues collected from the individual including final pay or anticipated final pay _____ **(Provided by Employer/Payroll Department)**

(7) Subtract amount in box (5) from amount in box (6) and enter here in box (7) _____ **This total is the amount due to OEA and is the amount you will enter in Column E of Section III**

