



FLORIDA ASSOCIATION OF SCHOOL ADMINISTRATORS

"To support & empower administrators in providing high quality education to all students in Florida."

Individual/Institutional Membership

Weekly FASA Friday Facts newsletter & Florida Education Calendar

Daily Morning Announcements email

Advocacy Updates and Resources

Legal Defense Assistance up to \$6,000

Strategic Leadership Exchange Mentor Program

Leadership Development through Board & Committee Service

Awards & Recognition

Professional Learning, FREE Webinars & Conference Discounts

\$258 per year

Payroll Deduction Authorization Form

Name: _____ Title: _____
Email: _____ Phone: _____

Check all that Apply:

**Note: Principals joining FASA must also join NAESP or NPA due to a joint affiliate agreement.*

- FASA Individual Member \$258
- NAESP Individual Member \$259 - *National Association of Elementary Principals (serves K-8 leaders)*
- NPA Individual Member \$250 - *National Principals Association (serves K-12 leaders)*

(These are annual rates. Payroll department will pro-rate deductions based on district pay frequency schedule.)

I hereby authorize the School Board of _____ County, Florida, to deduct dues from my salary as indicated above and in the future in amounts certified annually by the Florida Association of School Administrators. I authorize the distribution of the monies deducted to the designated associations and release the School Board and its employees from any liability after the deduction has been distributed. The authorization will remain in effect unless cancelled by me.

DATE: _____ SIGNATURE: _____

*Payments can be made online, via pay deduction, check, or credit card over time.
If completing this form for Payroll Deduction, please submit it to your district payroll department.*