



# NEWBURGH TEACHERS' ASSOCIATION

A Union of Professionals  
NYSUT  
AFT  
NEA  
AFL-CIO  
Local #2867

52 Pierces Road Newburgh NY 12550 • Phone 845.562.8120 • Fax 845.565.7905 • www.newburghta.com

## MEMBER INFORMATION CHANGE FORM

Newburgh Teachers' Association members, please use this form to update your personal membership information if you have changed any of the information listed below. Due to "HIPPA" requirements, this must be done separately for the NTA and the Benefit Trust Fund. You may update your NTA records by completing this form and forwarding it to the NTA office. This information is for NTA use only.

*Please Print Clearly*

**Please Check One:**

Teacher  Teaching Assistant  Substitute  Retiree  Other

**School:** \_\_\_\_\_

**Name:** Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_

Please check if change of name. Previous Name: \_\_\_\_\_

**ADDRESS:** Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**HOME EMAIL ADDRESS** \_\_\_\_\_ @ \_\_\_\_\_

**D.O.B.** \_\_\_/\_\_\_/\_\_\_ **SEX:** \_\_\_M \_\_\_F **MARITAL STATUS:** \_\_\_S \_\_\_M \_\_\_W

**DATE OF EMPLOYMENT** \_\_\_/\_\_\_/\_\_\_ **TENURE AREA** \_\_\_\_\_

**ARE YOU A REGISTERED VOTER?** \_\_\_ YES \_\_\_ NO

**If Yes, what school district?** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_