Association of **C**alifornia **S**tate **E**mployees with **D**isabilities
(Formerly Disabled In State Service, DISS)
P.O. Box 161526, Sacramento CA 95816-1526
http://ACSEDonline.org

MEMBERSHIP APPLICATION

(Please send completed form to the address above)

Name (Print) _____ ____ _____
Last M I First

Address _____ _____ _____
Street City Zip

Telephone (__) _____ (_____) _____
Work Home (optional)

Employer / Department _____

Title / Position _____ E-mail Address _____

ACSED MEMBERSHIP CATEGORIES

☐ **Regular ACSED Member - $30.00 / year** **(Individuals who are currently working for the State of California.)**

☐ **Supporting ACSED Member - $24 / year** **(Individuals who are not currently employed by the State.)**

☐ **Student Member - $12 / year** **(Individuals enrolled in an institution of postsecondary education and working in or seeking employment in state government.)**

Dues are $2.50 per month by payroll deduction, or $30 annually.

Method of payment (please mark one box below (1 - 5)

1. ☐ Payroll deduction for active state employee – Regular ACSED members

2. ☐ Retirement deduction for retiree – Supporting ACSED members

(Note: For payroll/retirement deduction, please read the following and fill in SSN, signature, and date.)

I hereby authorize the State Controller/CalPERS to deduct from my salary/retirement and transmit as designated an amount for membership dues and any benefit program for which I have applied which is sponsored by the above employee organization. This authorization will remain in effect until cancelled by myself or by the organization. I certify I am a member of the above organization and understand that termination of membership will cancel all deductions made under this authorization.

_____ _____ _____
Social Security Number Signature Date

PAYMENT BY CHECK METHOD: I prefer paying my full dues now. Please select appropriate payment category below. (Make check payable to *DISS until further notice.)*

3. ☐ **Regular ACSED Member - $30.00 / year** **4.** ☐ **Supporting ACSED Member - $24.00 / year**

5. ☐ **Student - $12.00 / year**

Committee Area of Interest: (Please check one or more boxes)

☐ Membership Recruitment & Outreach ☐ Program Committee ☐ Member Activities & Services

☐ Technology Services ☐ Legislative Analysis ☐ Scholarship Program Committee

☐ ACSED Logo/Graphic Design ☐ Other

Alternate formats available upon request. Please visit us at http://ACSEDonline.org for details. *Rev. 09-08*