



Membership Application

Annual dues for members of the Madison Academic Staff Association are \$10 per year, payable by payroll deduction. The first year is free to new members using the payroll deduction payment method.

To authorize a payroll deduction, complete the form below and mail it to:

Membership Coordinator, Madison Academic Staff Association
Memorial Union
800 Langdon Street
Madison, WI 53706

If someone referred you to MASA, please also indicate his/her name.

Member Information

Name (please print)_____

Campus address_____

Email address_____

Person ID# (on earnings statement)_____

Referred by_____

Payroll Deduction Authorization

I hereby authorize the University of Wisconsin to deduct from the October payroll a sufficient amount of earnings to provide for the prevailing rate of dues to the Madison Academic Staff Association (MASA). This authorization may be terminated by me upon 30 days written notice given to the UW–Madison Payroll Office.

Signature_____Date_____