



BCTF

British Columbia Teachers' Federation A Union of Professionals
100-550 West 6th Avenue, Vancouver, BC V5Z 4P2 bctf.ca
604-871-2283 1-800-663-9163

F08-20/Rev. June 2020

Affiliate Administrative Membership Application

The British Columbia Teachers' Federation (BCTF) is committed to both protecting the privacy and confidentiality of our members' personal information and complying with British Columbia's *Personal Information Protection Act*. We are collecting your personal information on this form because it is needed to provide the services (outlined overleaf) to which you are entitled as an affiliate administrative member.

To view the BCTF's complete privacy policy, visit our website at bctf.ca/PrivacyPolicy.

Important note: In order to maintain eligibility for continuation of BCTF Salary Indemnity Plan coverage, **application** for Affiliate Administrative membership, as well as **payment** of the application fee (\$100.00), **must be received by the BCTF within 30 days of appointment** as a temporary administrative officer. Coverage may be accessed during the 12 months from date of appointment, and is not renewable; for additional information, see overleaf.

Authorization to employer

Effective _____, 20____, for up to one year, I hereby authorize the Board of School Trustees of School District No.____ (_____) to deduct from my gross salary and/or wages, and pay to the British Columbia Teachers' Federation, the sum equivalent to the British Columbia Teachers' Federation Salary Indemnity Plan fee according to the scale currently in force pursuant to its Constitution and By-laws.

Applicant name (please print)

Applicant's signature

Date

Member information

Please print clearly, providing all requested information.

Legal First Name _____ Preferred Name _____

Middle Name(s) _____ Last Name _____

Date of Birth _____ Former Last Name _____

(DD / Month / YYYY, e.g., 04/May/1985)

Mailing address _____

Unit, Street / PO Box / RR

City

Postal Code

Home phone (_____) _____ - _____ Email (personal) _____

Cell phone (_____) _____ - _____ Email (district) _____

Appointing SD # _____ SD name _____ Appointing SD employee # _____

Date of appointment _____, 20____ TCB (Teacher) Certificate # L _____

Please inform membership@bctf.ca if there are changes to the above information during your membership period.

FOR BCTF OFFICE USE ONLY

Member Records and Fees Department

Effective date _____ Expiry date _____ Member ID _____
(DD / MM / YYYY) (DD / MM / YYYY)

Accounting Department Paid by: School District Member Date paid _____, 20____

Method of payment: Cheque # _____ or Deposit # _____ or Credit card _____

Affiliate administrative membership entitles you to ...

- ✓ participate in the BCTF Salary Indemnity Plan for up to one year
- ✓ receive the *Members' Guide to the BCTF*, on request
- ✓ receive the BCTF's *Teacher* magazine, on request
- ✓ access advice on benefit plans, employment insurance, Workers' Compensation Board, Teachers' Pension Plan, Canada Pension Plan
- ✓ participate in the various insurance plans (subject to eligibility conditions), including:
 - BCTF/BCSTA Group Life Plan
 - North American Group Life Plan
 - BCTF/Royal Trust Group Registered Retirement Savings Plan
 - BCTF/Industrial Alliance Voluntary Group Life Plan
- ✓ join Provincial Specialist Associations (PSAs) at the PSA's Member rate
- ✓ participate in BCTF Professional Development activities.

Affiliate administrative membership will ensure coverage under the BCTF Salary Indemnity Plan for the percentage fee currently payable by BCTF active members, plus the employee's share of the reduced employer contribution to employment insurance (payroll deduction), for up to one year from date of appointment. Please make sure your application form and payment are received within the timeline.

Affiliate administrative members are not eligible to vote or hold office in the BC Teachers' Federation.

Timeline	Both application and fee must be received by the BCTF within 30 days of appointment as a temporary administrative officer.
Fee	The affiliate administrative membership fee of \$100 , payable directly to the BCTF, must also be received within 30 days of appointment. The appropriate Salary Indemnity Plan and EI Rebate fees will be deducted from salary and remitted to the BCTF via monthly school district payroll during the eligibility period.
Payment	The affiliate administrative membership fee may be paid in one of the following ways: By the school district: <ul style="list-style-type: none"> • by cheque or EFT, with <i>dues</i>, as part of a monthly remittance (as long as we are notified within 30 days of appointment) By the member: <ul style="list-style-type: none"> • by cheque, payable to the BCTF (see letterhead, overleaf, for address) • by credit card: call 604-871-2283 or 1-800-663-9163: Accounts Receivable
Questions	Member Records and Fees Department: 604-871-2119; membership@bctf.ca Salary Indemnity Plan: 604-871-1921, or 1-800-663-9163: Plan Administrator