



South Carolina State Employees Association

Mail Completed Form To:

SCSEA
P.O. Box 8447
Columbia, SC 29202-8447



Check One:

- Active Employee
- Retiree
- Associate

Check One:

- New Member
- Renewal

Membership Enrollment

Name:

(First)

(MI)

(Last)

Email:

Street Address:

City:

State:

Zip Code:

Mailing Address: (If Different)

City:

State:

Zip Code:

Social Security Number:

- ## -

Cell Phone:

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Area Code ### - #####

State Agency:

Recruited By:

Membership Dues Schedule

	Per Pay Period	Monthly	Annual
Annual Income Less Than \$35,000	\$2.50	\$ 5.00	\$ 60.00
Annual Income Greater Than \$35,000	\$5.00	\$10.00	\$120.00
Associate Member	-----	-----	\$ 60.00

PAYROLL DEDUCTION (Active Employee)

For your convenience payroll deduction is available at <http://www.sceis.sc.gov/page.aspx?id=93> ONLINE Services utilizing the SCEIS, Employee Self-Service payroll deduction system. **Select 2208-SC State Employee.** If you need assistance setting up your SCEIS account, please contact your Human Resource Department.

PENSION DEDUCTION AUTHORIZATION (Retiree)

I hereby authorize the SC Retirement Systems to withhold \$ _____ (per month) from my retirement pension.

Signature _____

Date _____

Credit Card Payments

For your convenience, you may pay your annual membership dues by debit or credit card at www.scsea.com – ONLINE Services.

Check or Money Order

If you wish to pay the total amount of annual dues by check or money order, enclose your check or money order made payable to the "SC State Employees Association".