

NEBRASKA STATE EDUCATION ASSOCIATION

AUTOPAY UPDATE FOR 2026-2027

LOCAL	
FIRST NAME/LAST NAME	
WORK LOCATION	
PERSONAL E-MAIL	
CELL NUMBER	

To update or change your current payment method.

You can call the NSEA Membership Department (402) 475-7611 or go to the NSEA website and update the information at the following link: <https://www.nsea.org/members>

Click on "AutoPay: Change Pay Method...." Walk through the process of updating your banking information or pay in full by credit card. **Note: Do not enter your credit card information if you want the payment plan. The credit card option is for payment in full only. Your checking account routing and account information is what is needed for the payment plan.**

You will need your Individual ID (XXXXXXXXXX) and your zip code.

Please select your preferred option for paying your membership dues for the 2026-2027 school year:

Option 1:

☐ I wish to pay my dues in full by either check or credit card. I acknowledge that I do not need to make a payment now, and NSEA will provide me with payment instructions in August. I also understand that my current payment method for membership dues will continue through the current membership year. (September 1 - August 31)

Option 2:

☐ I prefer to pay my dues through the 10-month payment plan (from October to July). I have attached a voided check or completed the form below. I understand that my current payment method for membership dues will continue through the current membership year. (September 1 - August 31)

If Option 2 (10-Month Payment Plan): Please complete the following banking information to update your payment method to the AutoPay payment plan for your membership dues. *Deductions will begin in October.*

EFT (ELECTRONIC FUNDS TRANSFER): Bank Draft Authorization: Complete this authorization or attach a voided check.
Payment Plan: Dues deducted October – July; no dues are deducted in August and September.

ACCOUNT TYPE:	☐ CHECKING	☐ SAVINGS	NOTE: DO NOT USE DEPOSIT SLIPS FOR BANKING INFORMATION.														
NAME ON ACCOUNT:																	
BANK NAME:																	
BANK ROUTING NUMBER (9 DIGIT):																	
BANK ACCOUNT NUMBER:																	

Signature: _____ Date: _____

Return to the NSEA Office, %Membership, 605 S 14th Street, Lincoln NE 68508