

**ASSOCIATION OF DIAGNOSTIC IMAGING TECHNOLOGISTS**  
**ADIT**  
**SERVICE FEES DEDUCTION AUTHORIZATION**

I hereby authorize and direct my Employer (Essentia Health-Virginia) to deduct from my wages, a one-time initiation fee as a new employee of Essentia Health-Virginia Hospital, to be paid directly to the Association of Diagnostic Imaging Technologists (ADIT) on my behalf in accordance with the terms of the Collective Bargaining Agreement between the Employer and ADIT. The amount of the one-time initiation fee has been authorized in accordance with the Constitution and Bylaws of ADIT (voted upon by our ADIT Membership).

I further authorize and direct my employer to deduct a service fee per pay period from my wages, to be paid directly to ADIT on my behalf in accordance with the terms of the Collective Bargaining Agreement between the Employer and ADIT. The amount of this service fee has been authorized in accordance with the Constitution and Bylaws of ADIT (voted upon by our ADIT Membership).

I agree that if I resign my membership in ADIT, but continue to work for my employer, in an ADIT bargaining unit position, the amount set forth will be deducted from my wages and paid to ADIT for the services provided by ADIT unless applicable federal or state laws permit me to pay a lesser amount.

This Authorization shall be altered in accordance with my employment status (Full-time or Part-time) when the Hospital gives ADIT written notice and the change will be effective the next pay period.

<p>_____</p> <p style="text-align: center;">(<b>Print</b> Employee's Name)</p> <p>_____</p> <p style="text-align: center;">(Employee's Signature)</p> <p>_____</p> <p style="text-align: center;">(Employee's Street Address)</p> <p>_____</p> <p style="text-align: center;">(Employee's City, State and Zip Code)</p> <p>_____</p> <p style="text-align: center;">(Employee's Telephone Number)</p>	<p>Date: _____</p> <p>Date of Hire: _____</p> <p><b>Job Category:</b> (Please Check One)</p> <p>Behavioral Health Technician _____</p> <p>Diagnostic Sonographer _____</p> <p>Histology Technician _____</p> <p>Medical Lab Technician _____</p> <p>Nuclear Medicine Technologist _____</p> <p>Polysomnographic Technologist _____</p> <p>Radiologic Technologist _____</p> <p>Respiratory Therapist _____</p> <p>Surgical Assistant _____</p> <p>Surgical Technologist _____</p>
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Total Hours per Pay Period: \_\_\_\_\_

**Send or fax a copy of this Authorization to:**  
ADIT  
807 Broadway Street NE  
Suite 127  
Minneapolis, MN 55413  
Office: 763-213-8252  
Fax: 763-753-7463

# **Essentia Health Virginia Association of Diagnostic Imaging Technologists (ADIT)**

## **Questions and Answers Concerning Your Dues:**

Association of Diagnostic Imaging Technologists (ADIT) represents your position at Essentia Health Virginia. Listed below are some commonly asked questions and answers related to being a Union (Contract) employee -

**1. How much are the dues?**

- If you are regularly scheduled 64 to 80 hours/pay period, your dues will be \$16.00/pay period.
- If you are regularly scheduled less than 64 hours/pay period, your dues will be \$8.00/pay period.

**2. How much is the Initiation Fee?**

The ADIT Initiation Fee is a one-time deduction of \$25.00. All new employees will pay an Initiation Fee.

**3. When does the Initiation Fee and dues start being deducted?**

The Initiation Fee is deducted within the first 30 days of your employment. The dues are deducted following the completion of the first 30 days of employment and on each pay period thereafter.

**4. Do I have to fill out the Service Fees Deduction Authorization form?**

Yes, you must fill out the Service Fees Deduction Authorization form. This form authorizes your Hospital to automatically deduct dues from your salary.

**5. What if I don't want to join the ADIT?**

You may resign your membership in ADIT, but the amount set forth will be deducted from your salary, to be paid to ADIT, for the services provided by ADIT unless applicable federal or state laws permit a lesser amount. This amount will be called a service fee. Failure to pay the service fee shall be grounds for immediate dismissal.