



**Assignment and Authorization for Payment of Dues,
Assessments and Service Charges**

To: Spirit Airlines, Inc.

I, _____, hereby authorize and direct SPIRIT AIRLINES, INC. to deduct from my pay such monthly dues and assessments as are now or may hereafter be established in accordance with the Constitution and By-Laws of the Association, or service charge in an amount equal to such dues for remittance to the Air Line Pilots Association.

I agree that this authorization shall be irrevocable for one year from the date hereon or until termination of the check-off agreement between SPIRIT AIRLINES, INC. and the Association, whichever occurs sooner.

If the check-off agreement is terminated, this authorization shall be automatically terminated. In the absence of a termination of the check-off agreement, this authorization may be revoked effective as of any anniversary date of the signing hereof by written notice given by me to SPIRIT AIRLINES, INC., and the Association by Certified Mail, Return Receipt Requested, during the ten (10) days immediately preceding any such anniversary.

ALPA Member Number _____

Street Address _____

City _____ State _____ Zip _____

Employee Number _____

Signature _____

Date _____

Please Return this Form to ALPA Membership Administration Department.

Email: Membership@alpa.org

Fax: 703-464-2115

Mail: Air Line Pilots Association, Int'l
c/o Membership Administration Department
7950 Jones Branch Drive Ste 4005
McLean, VA 22102

Disclosure Statement Required by Federal Tax Law
Dues, contributions, and gifts to ALPA are not tax deductible as charitable contributions.