

RETIRED MEMBERSHIP ENROLLMENT FORM



Instructions: Complete this form and mail it to the address at the bottom. Either sign for monthly dues deduction (option #1) or enclose a check for annual dues (option #2).



ACTUAL RETIREMENT DATE (MM/DD/YYYY)

NAME (PRINT)

SOCIAL SECURITY NUMBER (REQUIRED)

ADDRESS

CITY

STATE

ZIP CODE

CELL/HOME PHONE NUMBER

ACCEPT TEXT?

☐ YES ☐ NO

EMAIL ADDRESS

OPTION #1 – MONTHLY DEDUCTION FROM RETIREMENT CHECK

☐ **RETIRED ACTIVE** **\$11.76**
Payroll Deduction of Dues – per month

OR

☐ **RETIRED ESP** **\$10.58**
Payroll Deduction of Dues – per month

I authorize the Teachers' Retirement System of Alabama to deduct monthly dues from my retirement check for AEA/NEA-Retired and AERA. Current dues amount above will increase with the enactment of future COLAs. My membership deductions are to continue until revoked by written notification to Teachers' Retirement System of Alabama.

SIGNATURE _____ DATE _____

*Includes \$3 per month voluntary contribution for AEA's AVOTE to help elect friends of education to public office in Alabama. Deduct \$3 if you choose not to help elect legislators who support COLAs, bonus checks, and PEEHIP funding for retirees.

Do not write in this space.

OPTION #2 – ENCLOSE CHECK PAYABLE TO AEA/NEA-RETIRED

Retired Active – \$141* OR Retired ESP – \$127*

Your check covers unified dues for AEA/NEA-Retired and AERA

Your membership will be effective September 1 through August 31.

* Includes \$36 voluntary contribution for AEA's AVOTE to help elect friends of education to public office in Alabama. Deduct \$36 if you choose not to help elect legislators who support COLAs, bonus checks, and PEEHIP funding for retirees.

MAIL TO: AEA/AERA, Attention: Retired Membership, PO Box 4177, Montgomery, Alabama 36103
OR...JOIN NOW ONLINE AT myAEA.org.