

Florida Retired Educators Association Membership Application

Annual FREA Membership \$35.00

- New Membership
 Renewal of Membership

Circle One:
 Retired School Teacher/School Administrator/School Transportation/ School Maintenance, School Cafeteria. Other:

Associate Member
 Associate: Any person supporting the work of the Association may apply for associate membership.

Circle One: Miss, Mrs., Mr., Dr., Other		Date:
Your Name:		Spouse's Name
Mailing Address	Apt./Condo	Telephone—Cell phone preferred ()
City	State	Zip County
E-mail address:		Your Date of Birth:
School District Retired From:	Position/Year Retired	Local FREA Unit (if known) If not, would you like info? _____

FREA is your advocate regarding your pension and the future of education in the State of Florida. Would you like to support FREA's efforts on behalf of all present, and future Retired Educators, and other beneficiaries of the Florida Retirement System? This money will be used in a non-partisan way.

Yes, I would like to support FREA's Legislative Advocacy: \$ 4.00

FREA Dues for July 1—June 30: \$35.00

Local Unit Name _____ Dues (If you belong to one) _____

Total Enclosed \$ _____

Make checks payable to: FREA
Mail to: 8950 9th St. N. Suite 105—St. Petersburg, FL 33702

Call the Office with your credit card 727-577-6400 M-F 9-3 EST Or any time, email or call and we will call you back.	<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard	<input type="checkbox"/> Discover	<input type="checkbox"/> American Express
	Name on Card			Exp. Date
	Card Number	- - -		



Questions? Please feel free to contact the FREA Office:
 727-577-6400 or info@frea.org

FREA Office Use Only
Check #
State:
Local:
Legis.
Total: