

FREA State and Local Unit Membership Application

Annual FREA Membership \$45.00	
<input type="checkbox"/> New Membership <input type="checkbox"/> Renewal of Membership	<input type="checkbox"/> General Member Retired from Education System as: (Circle One): Educator/Administrator/Transportation/Maintenance/Food Service. Other:
FREA Benefits are fully available to ALL FREA members be they Regular or Associate.	<input type="checkbox"/> Associate Member Associate: Any person supporting the mission of the Association may apply for associate membership. All benefits are available, except for the ability to serve as a Unit Delegate and vote at the Delegate Convention
Circle One: Miss, Mrs., Ms., Mr., Dr., Other Your Name:	Date:
Mailing Address Apt./Condo	Telephone—Cell phone preferred ()
City	State Zip County
E-mail address:	Your Month, Day and/or Year of Birth:
Retired From (Circle one): K-12 School, College, University 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 Annual State Dues \$45.00

Please add \$5.00 (or other amount) to my total for the Florida Retired Educators Foundation to support future, present, and retired educators through Grants and Scholarships. \$ _____

Local Unit Name (If you belong to one) _____ Local Unit form is on back
 Local Unit Dues \$ _____

Total Enclosed \$ _____

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

You can also Join Online www.frea.org	<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard	<input type="checkbox"/> Discover	<input type="checkbox"/> American Express
	Name on Card		Exp. Date CVS Code 3 or 4 digit	
	Card Number		<input type="checkbox"/> Check here if you would like FREA to automatically renew your membership	



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

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