FREA State and Local Unit Membership Application

Annual FREA Membership S	45.00					
☐ New Membership ☐ Renewal of Membership	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.		person supporting the All benefits are available				
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?		
	ent, and retired ocal Unit Name		a Retired E Grants and e)	FRI ducators Fo Scholarship 1	EA Annual undation osLocal U Local U Total Enclo	\$sint form is on back Juit Dues \$sed \$
You can also	□ Visa	☐ Mastercard	Discove	/er ☐ Amer		can Express
Join Online www.frea.org	Name on Card			Exp. Date CVS Code 3 or 4 digit		
www.iiea.org	Card Number	Card Number – – Check here if you would like FREA to automa			_ natically renew your membership	
Please feel free to contact the FREA Office: 727-577-6400 or info@frea.org						FREA Office Use Only Check # State: Local: Legis. FREF
Revised June 2023						Total: