NEA-Alaska Pre-Retired/Retired Membership Form

Continue the commitment. After all, you spent your lifetime deeply involved in education. Your interest won't suddenly end when you retire. In fact, we may be able to help you solve many retirement concerns.

Join NEA-Alaska/Retired now and make your voice heard in the organization that works actively and diligently to protect your retirement benefits. Now more than ever we must protect against retirement threats that include under-funded and at-risk pension plans, attempts to cut back or eliminate retiree medical benefits, and the creation of weaker pension tiers in Alaska.

You'll be kept informed through free publications once your pre-retired dues are paid in full — ***NEA-Alaska/Retired newsletter, NEA-AKtivist, and NEA Today for NEA Retired Members***. Remember, joining also maintains benefits such as attorney referrals and Horace Mann insurance. Remain eligible to participate in NEA-Alaska at every level, running for office, and attending conferences. You'll be supporting Alaska's premier watchdog on retirement issues, shaping legislation that impacts retirees, and dealing with TRS/PERS issues. You'll also be adding your voice to NEA-Retired, which protects your retirement interests on the federal level. If you have questions regarding NEA-Alaska/Retired, membership benefits, or payment options, please visit our web page at http://neaalaskaretired.com/, contact Barb George at lady_loon@hotmail.com or call the Anchorage office at 907-274-0536 or toll free 1-800-996-3225.

Select a payment plan below that works best for you and become a fully paid-up member while you're still in your earning years. Dues payments are not deductible as charitable contributions for federal income tax purposes. Dues payments (or a portion) may be deductible as miscellaneous itemized deductions.

PRINT FORM, SIGN, AND DATE. Mail your application to: NEA-Alaska/Retired, 4100 Spenard Road, Anchorage, AK 99517.

Last Name:	**First Name:**	**MI:**	**PAYMENT OPTIONS**
Address:			**Please check one:**
City:	**State:**	**Zip:**	☐ **Check in full - $450** (Please enclose.)
	Home Ph:		☐ **Check installment - Four (4) consecutive monthly $112.50 checks** (Please enclose first payment.)
E-Mail:			☐ **Credit Card in full - $450**
Actual or anticipated retirement date (M/Y):			☐ **Credit Card installment - $112.50 for four (4) consecutive months**
School District:			• **Please circle one: VISA or MasterCard**
MEMBERSHIP OPTIONS – CHECK ONE			**Credit Card #: - - -**
☐ **Retired Life Membership**	☐ **Pre-Retired Life Membership**		**Exp. Date: CVC #**
(NEA-AK/R Life $200 + NEA/R Life $250 = $450)	**(NEA-AK/R Life $200 + NEA/R Life $250 = $450)**		
Signature Required:			**Date:**