



## 2023 - 2024 Retired Chapter Membership Form

*Please Print Complete Information*

\_\_\_\_\_  
First Name MI

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Home Street Address

\_\_\_\_\_  
E-mail address -- Personal/Home only

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Cell/ Home Phone number

XXX-XX-\_\_\_\_\_  
Last four digits of SSN

\_\_\_\_\_  
Date Retired

\_\_\_\_\_  
University /College Retired from

**Check or credit card payment must be sent in along with this form.**

Dues structure for Retired-Annual and Retired-Lifetime.

	NEA/AFT	FEA	FL AFL-CIO	CLC	UFF	Total
<i>Retired-Annual</i>	\$35.00	\$11.00	0	0	\$45.00	<b>\$91.00</b>
<i>Retired-Lifetime</i>	\$300.00	\$100.00	0	0	\$100.00	<b>\$500.00</b>

Direct Payment dues: (check one)

Annually(\$91.00/yr)  Lifetime (One time payment \$500.00)

Check Enclosed (make out to FEA)      Check Amount \_\_\_\_\_

**or**

Charge to credit card      Amount to Charge \_\_\_\_\_

Visa # \_\_\_\_\_ exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

M/C# \_\_\_\_\_ exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please enroll me immediately as a member of the United Faculty of Florida (FEA, NEA-AFT, AFL-CIO).**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

(Signature authorizes membership and credit card charges if applicable)

**Please return this form to** UFF 115 N. Calhoun St., Suite 6, Tallahassee, FL 32301.  
For questions, please contact Aileen S. Ray, 850-224-8220, aileen.ray@floridaea.org