2019-2020 Enrollment	Form for R	letired Membership in	NEA, MSEA & TABCO-R
our name		Date	
our name	* 1811	Dute	
Retirement date		Home telephone	
lome address Street, City, State, Zip)			
Cell phone	Home email address		
our Retiree Membei	ship Due	28	
Choose Annual or Lifetime	dues below:		RETURN THIS FORM TO:
☐ Annual dues	\$ \$7	72.00	MSEA Membership
☐ Lifetime dues	10	582.00 527.00 if payment received by 9/1/19)	Annapolis, MD 21401
ou from future dues increases a		MENT OPTIONS	nembership.
☐ Option 1: Deduct dues fro This option available for applicate payment option.			
Dues Deduction Authorization			nsion System of Maryland to deduct n shall remain in effect until I revoke i
			ne en e
Signature		Date Social Sec	urity Number Required for Option 1
Option 2: Check Make chec	k payable to MSE	A. Deduct \$55 on Lifetime Membe	rship if joining before September 1,
☐ Option 3: Credit Card	□ VISA	☐ MasterCard	Deduct \$55 on Lifetime Membership if joining before September 1, 2019.
Card number		Expiration date	
Card number		Expiration date	The section of the se