

ESP RETIRED or PRE-RETIRED

LIFE MEMBERSHIP

You've spent your lifetime deeply involved in education. Your interest won't suddenly end because you've retired. The fact is, it doesn't have to end and neither does your involvement. You've retired from your position – not your profession.

RIGHTS & PRIVILEGES

- A WEA active ESP member is eligible at any time to join as an ESP Pre-retired member of the WEA-Retired ESP
- Open to any retired education employee of K-Graduate level, or who was employed for a least five (5) years in a position that qualifies him/her for Active membership
- Right to vote in WEA elections
- Right to hold elective or appointive positions as described in the ESP Retired Constitution and Bylaws

Your dues can be totally offset by taking advantage of a wide array of benefits. Go to <https://www.neamb.com> for a list.

Remember – without continued membership in NEA/WEA ESP Retired or Pre-retired Life, all benefits cease upon retirement.

PLAN TO JOIN NOW, EVEN IF YOU HAVE NOT RETIRED

NEA/WEA – ESP Retired or Pre-retired Life Membership is a one-time fee of \$280.

Name: _____

Mailing Address: _____

Cell Phone: _____ Home Phone: _____

SSN4 (last four digits only): _____ School District: _____

Home Email: _____

ESP RETIRED/DATE OF RETIREMENT _____ ESP PRE-RETIRED

Signature: _____

-payment options on back-

ESP Retired or Pre-Retired Life - PAYMENT OPTIONS

Dues can be paid by check, credit card, electronic funds transfer (EFT), or money order: **NO PAYROLL DEDUCTION**

OPTION 1: Check/Money Order – One-time payment only

OPTION 2: EFT -Up to 5 (five) payments deducted.

Membership Type/Fund/Obligations:

Fund Name	Membership Type	Annual Dues
NEA	ESP Retired RT-9-2	\$180.00
	ESP Pre-retired RT-9-6	
WEA	ESP Retired RT-9-2	\$ 50.00
	ESP Pre-retired RT-9-6	
LEA	ESP Retired RT-9-2	\$ 50.00
	ESP Pre-retired RT-9-6	
Total Obligation		\$280.00
<ul style="list-style-type: none"> • Total amount due can be divided into 2 to 5 payments, provided the total obligation is paid in full no later than July 10th. • Deductions run from October through July of each membership year and each withdrawal will occur on or about the 10th of the month. <p style="margin-left: 20px;">Month to begin withdrawals: _____</p> <ul style="list-style-type: none"> • Number of monthly payments (circle one): <p style="margin-left: 40px;"> 2 3 4 5 6 </p>		

Account pulling from:

Checking or Savings

0123
01 23456789

NAME _____
ADDRESS _____
CITY, STATE, ZIP _____

DATE _____

PAY TO THE ORDER OF: _____ \$ _____
DOLLARS

BANK NAME _____
ADDRESS _____
CITY, STATE, ZIP _____

FOR _____

⑆0 234 5678⑆
⑆0 234 567890 23⑆
⑆0 23

Bank Routing Number
Bank Account Number
Check Number

I'm authorizing the payment of my ESP Retired or Pre-retired dues be initiated through my bank account.

Electronic Funds Transfer – Bank Draft Authorization																
Bank Name	_____															
Bank Routing Number (9 digit)	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>															
Bank Account Number:	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>															

OPTION 3: CREDIT CARD – One-time payment only

I'm authorizing the payment of my ESP Retired or Pre-retired dues be initiated through my credit card.

- Type of Credit Card: _____
- Expiration Date (MM/YYYY): _____
- Credit Card Number: _____
- 3-digit number on back of card: _____

Signature and Date are required for either option (EFT or Credit Card)

Signature: _____	Date: _____
------------------	-------------

Send completed form with payment or payment option information to:

Wyoming Education Association
115 East 22nd Street
Cheyenne, WY 82001

