WESTERN OHIO EDUCATION ASSOCIATION—RETIRED

MAIL TO ⇒ WOEA-Retired
P. O. Box 2937
Dayton, OH 45401-2937

MEMBERSHIP FORM 20____ - 20____ *MAKES CHECKS PAYABLE TO: WOEA-R*

PLEASE PRINT ALL INFORMATION — MEMBERSHIP YEAR IS FROM SEPTEMBER 1 TO AUGUST 31

NAME _____ TODAY'S DATE _____

ADDRESS _____ HOME PHONE _____ CELL PHONE _____

CITY _____ STATE _____ ZIP _____ LOCAL ASSOCIATION _____

COUNTY OF RESIDENCE _____ OEA MEMBER NUMBER _____

EMAIL ADDRESS _____ BIRTHDATE (MONTH/DAY) ____/____ RETIREMENT DATE _____

PERMISSION TO INCLUDE IN A MEMBERSHIP DIRECTORY _____ YES _____ NO

DUES ENCLOSED FOR:

PLEASE CHECK ALL THAT APPLY (MEMBERS SHOULD BE UNIFIED):

☐ WOEA-R Annual	First year complimentary
☐ WOEA-R Life Dues	$100.00
☐ WOEA-R Annual Dues for 20____ - 20____	$10.00
☐ WOEA-R Pre-Retired Life Dues	$100.00

ANTICIPATED RETIREMENT DATE:_____

MEMBERS SHOULD BE UNIFIED. PLEASE CHECK ALL THAT YOU HOLD:

☐ WOEA-R Paid up Pre-Retired	☐ OEA-R Paid up Pre-Retired	☐ NEA-R Paid up Pre-Retired
☐ WOEA-R Life Member	☐ OEA-R Life Member	☐ NEA-R Life Member
☐ WOEA-R Annual Member	☐ OEA-R Annual Member	☐ NEA-R Annual Member

LIFE MEMBERS: Use this form to update information, i.e. change of name, address, phone, etc.

TREASURER'S INFORMATION:

Check Number _____ CASH AMOUNT $ _____ Membership Years Paid 1 2 3 4 5 6 7 8 9 10 LIFE

Check Amount $ _____ Bank _____ DATE paid through _____

Check Date _____ Cash/Check Received Date _____

6.23.17