



Your profession Your community Your voice in retirement

Are you a member of MSEA/NEA Retired? If not, you're missing experienced local advocacy on issues like your pension, healthcare, and retirement. MSEA is the most influential lobbying group in the state and our access to leaders and policymakers means that issues affecting retired educators like you are heard. With membership, you'll also have immediate access to the savings, discount, and insurance programs that come with the exclusive buying power of 75,000 MSEA and 3 million NEA members.

MSEA/NEA Retired is the perfect extension and complement to many of the benefits you've used as an active member.

Here are just some of the benefits that come with your MSEA/NEA Retired Membership:

- MemberCare: A portfolio of supplemental health insurance programs, including Medicare Supplemental Insurance
- Attorney Referral Program: Two 30-minute personal consultations per year
- · Liability insurance while substituting less than 30 days/year
- National credit card service
- NEA's Discount Marketplace-Rakuten
- Publications, workshops, and seminars
- · Exclusive homeowners and auto insurance
- Rental car and magazine subscription savings
- NEA Travel Program



2022-2023 Enroll	ment Form for Retire	d Membership in N	IEA, MSEA & SAAAAC-R	
COUNTY (from which you retired)		RETIREMEN'	RETIREMENT DATE	
YOUR NAME		HOMETELER	HOME TELEPHONE	
HOME ADDRESS (Street, City, State, Zip)		CELL PHONE	CELL PHONE	
HOME EMAIL ADDRESS		DATE	DATE	
YOUR RETIREE MEMBERSHIP DUES				
Choose Annual or Lifetime due		below:	DETUDNI TIUG FORM TO	
			RETURN THIS FORM TO:	
☐ Annual dues	\$_ 49.00		MSEA Membership	
	F20 00		140 Main Street Annapolis, MD 21401	
☐ Lifetime dues	\$ <u>53</u> 0.00		7 William 6116, 1712 21 161	
Retired dues may be paid an	nually, or you may make one payn	nent for Lifetime Membershi	p.	
Lifetime Membership protects you from future dues increases and ensures that you will have continuous membership.				
PAYMENT OPTIONS				
			only. This option available beginning	
	30, 2022. Sign and return for eli			
Dues Deduction Authorization I hereby authorize the State Retirement and Pension System of Maryland to deduct retired membership dues from my December, 2022 pension check. This authorization shall remain in effect until I revoke it.				
,				
Signature	Date	Social Security Number Required for Option 1		

☐ Option 2: Check Make check payable to MSEA.

☐ VISA

■ MasterCard

Expiration date

Signature

☐ Option 3: Credit Card

Card number

Name on card

04228022

Date