

# United Faculty of Florida 2015-2016 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.

<b>Category</b>	<b>NEA/AFT</b>	<b>FEA</b>	<b>FL AFL-CIO</b>	<b>CLC</b>	<b>UFF</b>	<b>Total</b>
<i>Retired-Annual</i>	\$30.00	\$11.00	0	0	\$45.00	<b>\$86.00</b>
<i>Retired-Lifetime</i>	\$250.00	\$100.00	0	0	\$100.00	<b>\$450.00</b>

Direct Payment dues: (check one)

Annually       Life-Time

Check Enclosed (make out to UFF)      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 Street, Ste.6, Tallahassee, FL 32301.  
For questions, please contact Pamela Williams, 850-224-8220, pam.williams@floridaea.org