



If you wish to join WEA-Retired and have monthly membership dues deductions taken out of your Washington State pension, please complete and return this form to WEA-Retired.

Please consider using the online version of this form available at:

[http://forms.washingtonea.org/Forms/retired\\_dues\\_deduction\\_authorization](http://forms.washingtonea.org/Forms/retired_dues_deduction_authorization)

DUES DEDUCTION AUTHORIZATION FORM  
WASHINGTON EDUCATION ASSOCIATION-RETIRED  
P.O. Box 9100  
Federal Way, WA 98063-9100

**Please print – All fields are required**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
*Last First Middle*

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home/Personal Email Address: \_\_\_\_\_

SS Number: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Retirement Plan (Circle One):      TRS-1      TRS-2      TRS-3      SERS-2      SERS-3

I wish to join WEA-Retired as a Retired Monthly Member.

I authorize the Washington State Department of Retirement Systems (DRS) to regularly deduct a sufficient amount from my retirement benefit to pay the premiums for my Washington Education Association-Retired dues. I will not hold DRS responsible for any problems between WEA-Retired and myself.

Should I wish to cancel ensuing deductions I will send a written notification of cancellation to Washington State Department of Retirement Systems and WEA-Retired.

*(Dues as of September 2019: \$6.92 per month)*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_