**LRTA Membership Form**

Louisiana Retired Teachers Association

9412 Common St., Suite 5, Baton Rouge, LA 70809

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Title (X in front) |  | | Miss | |  | | | Ms. |  | | Mrs. |  | | Mr. |  | Dr. |  | | |
| Name |  | | | | | | | | | | | | | | | | | | |
| Social Security No. |  | | | | | | | | | | | | | | | | | | |
| Mailing Address |  | | | | | | | | | | | | | | | | | | |
| City |  | | | | | | | | | State | | |  | | | | | ZIP |  |
| Telephone | ( ) | | | | | | | | | | | | | | | | | | |
| Email Address |  | | | | | | | | | | | | | | | | | | |
| Are you a member of a local unit? |  | Yes | |  | |  | No | |  | | | | | | | | | | |
| Local Unit Name | St. Bernard Retired Teachers Association | | | | | | | | | | | | | | | | | | |

**LRTA Membership Options**

LRTA annual dues include membership from April 1-March 31 the following year. Several choices

are available for payment of LRTA dues.

Please indicate your preference below:

|  |  |
| --- | --- |
|  | Annual Member Dues-$30 (check enclosed) If you are an active teacher, you can join as an Associate member for $12/year. (see below) |
|  | Life Member Dues-$600 (check enclosed) |
|  | Annual Associate Dues-$12 (check enclosed) |
|  | Continuous Member-$30 (deduction authorized)  I authorize the Teachers' Retirement System of Louisiana to deduct my LRTA dues from my retirement check annually on April 1. I understand that I may cancel this authorization at any time by written request to the LRTA office. Please make checks payable to LRTA and mail with the membership form to the LRTA office. |

Note: Dues paid to LRTA are NOT deductible as charitable contributions for federal income tax purposes.

Reminder: Please support your local and district units through your dues and your participation.

**Fill out the form, print it, and mail to LRTA, 9412 Common St., Suite 5, Baton Rouge, LA 70809.**

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_