



COBB-MARIETTA RETIRED TEACHERS ASSOCIATION

MEMBERSHIP FORM 2021-2022

Date: _____ Year Retired: _____

Name: _____

Address: _____

City: _____ Zip: _____

Cell Phone: _____ Home Phone: _____

E-mail: _____

Annual Dues (\$30.00) \$ _____

Total Amount of Enclosed \$ _____

Lifetime Dues (\$200.00) \$ _____

Circle one: CASH or CHECK # _____

Donation to Scholarship Fund \$ _____

Make Check payable to C-MREA and mail to:
Judy Munson
2217 Loundon Lane
Kennesaw, GA 30152
nanajudy2014@gmail.com
(404) 661-0372

Donation to C-MREA General Fund (to cover mailings for those without emails, operating expenses, etc.)
\$ _____

The Georgia Retired Educators Association is a separate membership from our local unit. Are you a member, already? If not, here is a membership form.

LAST NAME FIRST NAME MIDDLE INITIAL

Address

City State Zip Phone #

EMAIL NEW MEMBER RENEWAL

AUTOMATIC DUES DEDUCTION (A.D.D.)

SS# or TRS Retirement # is required.

My signature below authorizes TRS to deduct \$2.00/month from my TRS pension payment. This authorization will remain in effect until I choose to terminate it by notice to Georgia Retired Educators Association.

Signature Date

\$27 ONE YEAR
 \$360 LIFE

Send check with this card to the address below. Make check payable to GREA.

Local Unit/County
Cobb-Marietta

FOR OFFICE USE ONLY

CONTROL #

DATE

Return this portion to:
Georgia Retired Educators Association
P.O. Box 1379 • Flowery Branch, GA 30542
Website: garetreduceducators.org

GREA MEMBERSHIP FORM
Fellowship — Service — Support