2026-2027

LAST NAME FIRST NAME MIDDLE INITIAL

Address

City State Zip Phone #

EMAIL

☐ **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

OR

☐ **$27 ONE YEAR**

☐ **$360 LIFE**

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

Local Unit/County

FOR OFFICE USE ONLY

CONTROL #

DATE

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

GREA MEMBERSHIP FORM

DETACH HERE, RETURN THIS SIDE

KEEP THIS SIDE FOR YOUR RECORDS

Georgia Retired Educators Association
2026 - 2027 Membership Card

Name

Fellowship — Service — Support

Membership July 2, 2026 - June 30, 2027

Dr. Sallie Mills
President 2026 - 2027

Johnny Smith
Executive Director

Website: garetirededucators.org