MTEA-Retired (MTEA-R) Membership Form

Name (First, MI, Last)	Cell Phone Number	
Home Address		
City	State	Zip
Personal Email		
Are you Registered to Vote at Your Current Address? $\ \square$	Yes □ No □ I'm r	not sure
Political Action Committee Disclosure : The Milwaukee Teachers' Educated committee that collects voluntary contributions from MTEA members are making contributions to and expenditures on behalf of friends of public to regulation by the Wisconsin Ethics Commission. State law requires the address of all PAC contributors, and occupation of those contributing over	nd uses these contributions for poli education who are candidates for s e MTEA PAC to use its best efforts	tical purposes, including, but not limited to, tate and local office. The MTEA PAC is subject to collect and report the name and mailing
☐ Yes, I want to join MTEA-Retired (MTEA-R)! One time payment of \$75 for Teacher Unit, \$37.50 for EAs, ESP-150, Bookkeepers and Substitutes for lifetime MTEA-R membership.		
☐ Yes, I also want to make a contribution to MTEA PAC	! Check payers must submit	separate checks for dues and PAC.
I will make a voluntary recurring contribution to MTEA PAG	C in the amount of:	
□ \$5.00 monthly □ \$10.00 monthly □ \$25.00	0 monthly 🗖 \$	monthly
I will make a voluntary one-time contribution to the MTEA	-PAC in the amount of: □\$5	50 🗆 \$100 🗆 \$150 🗆 \$
Contributions to PACs are not tax deductible. Only U.S. citizens or lawful permanent res	sidents may contribute to PAC funds. Mon	thly withdrawals will be made on the 10th of each month.
MTEA EFT Withdrawal Authorization: I authorize the Milwaukee Teachers' Education Association (MTEA) or its designee to initiate Electronic Fund Transfers (EFTs) from the bank account designated below for the designated one-time MTEA-R membership fee and, if applicable, the recurring and/or one-time amount of the PAC contribution I indicated above. I understand that this authorization is voluntary and is not a condition of membership, and that I have the legal right to refuse to sign this agreement without suffering reprisal. I understand that this authorization for the payment of recurring PAC contributions continues year-to-year and shall remain in effect until the earlier of: 1) my written notice of cancelation according to the following procedures or 2) the termination of my eligibility to maintain membership in MTEA-R. I understand that if I wish to terminate this authorization, I must do so in a signed writing, addressed to MTEA at 5130 W. Vliet St., Milwaukee, WI 53208.		
What account would you like MTEA to use to make EFT withdrawals?		
☐ The payment method currently on file with MTEA ☐ The payment method specified below (or attach a voided check)		
New Bank Account Information: ACCOUNT TYPE:	19	DATE
Bank Name:	мемо	
Bank Routing Number:	Bank Routing Number	g Bank Account Check Number Number
Bank Account Number:		
Credit Card Information: Type of card (Visa, MasterCard, AMEX, Discover):		
Card Number: Expiration Date:		
By signing this application, I hereby request and voluntarily acce Association - Retired (MTEA-R).	ept lifetime membership in the	Milwaukee Teachers' Education

Signature_____

