ISTA/NEA RETIRED MEMBERSHIP APPLICATION

You may also join or renew your membership online at www.ista-in.org

20___ - 20___ **APPLICANT INFORMATION**

Please print legibly -

First:	Middle:	Last:
Date of birth:	SSN:	Home Phone:
Street address:		
City:	State:	ZIP Code:
County:	Cell Phone:	Home Email Only:

ENROLLMENT SELECTION

☐	$65	ISTA/NEA Annual Member *(available to retired members only)*
☐	$591	ISTA/NEA Retired Life Member
☐	$590	ISTA/NEA Pre-Retired Life Subscriber*

PAYMENT METHOD

Select One Pay Method:

☐ One-Time Bank Account Withdrawal *(Payment is automatically deducted from checking/savings account.)*

☐ Monthly Bank Account Withdrawal – *(Payments are automatically deducted from checking/savings account.)*

Payments are spread over 12 months if enrolled by September withdrawal date. The full dues amount must be paid within the membership year of September 1 – August 31 so monthly deduction amount is determined by number of months remaining in the membership year at the time of enrollment.

☐ One-Time Check – due to ISTA October 1 *(payable to ISTA-Retired)*

☐ One-Time Credit Card – Call ISTA Membership Department at 1-800-382-4037 ext. 3367 to process credit card payment. *(DO NOT submit credit card information on this form.)*

ELECTRONIC FUNDS TRANSFER - BANK DRAFT AUTHORIZATION

# of Deductions: _____ Deduction Amount: $ _____

Bank Name:	
Account Type:	☐ Checking ☐ Saving
Bank Routing Number: (9 digit)	
Bank Account Number:	PLEASE ATTACH A VOIDED CHECK TO THIS FORM.

***Note:** Pre-Retired subscribers must maintain their normal NEA/SEA membership until they qualify for a Retired membership. Failure to do so will result in the cancellation of the Pre-Retired subscription with no refund given.

Signature of Applicant: **Date:**

-Dues amounts are finalized annually by September 1.
-I AUTHORIZE ISTA TO DEDUCT/CHARGE EACH YEAR (IF APPLICABLE) MY MEMBERSHIP DUES FOR THE UNIFIED ASSOCIATION UNLESS I REVOKE THIS AUTHORIZATION IN WRITING. THIS AUTHORIZATION SHALL PERMIT AND ACCEPT ANY CHANGES IN THE AMOUNT OF DUES OFFICIALLY ADOPTED BY THE RESPECTIVE GOVERNING BODIES. ADDITIONALLY, I AGREE TO ABIDE BY THE CONSTITUTION AND BYLAWS OF EACH ORGANIZATION IN REGARD TO RESIGNATION OF MEMBERSHIP.
-DUES PAYMENTS ARE NOT DEDUCTIBLE AS CHARITABLE CONTRIBUTIONS FOR FEDERAL INCOME TAX PURPOSES. DUES PAYMENTS (OR A PORTION) MAY BE DEDUCTIBLE AS A MISCELLANEOUS ITEMIZED DEDUCTION.

RETURN THIS MEMBERSHIP APPLICATION FORM TO:

Indiana State Teachers Association, 2650 Reliable Parkway, Chicago, IL 60686-0026

(Direct depository address for submitting ISTA-Retired Membership Application and dues by mail.)

WHY JOIN ISTA/NEA RETIRED?

I — Impact your life as a retired public education employee.

S — Serve as a link with active members.

T — Treat yourself to free legal counsel.

A — Access informative workshops sponsored by ISTA-Retired.

R — Retain your professional affiliation with ISTA/NEA.

E — Educate yourself to new opportunities for volunteering in the community.

T — Take advantage - participate and provide input in local and state ISTA committees as well as ISTA-Retired Council and local chapters.

I — Increase your income - take advantage of NEA Member Benefits with its competitive rates for car and homeowners insurance, medicare supplemental insurance plus *Click and Save*.

R — Remain politically active by lobbying state legislators on retired and active teacher issues as well as by contributing funds to elect friends of public education.

E — Enjoy the fellowship of other retired members by joining a local ISTA-Retired Chapter.

D — Do the smart thing: save money. Join now as a pre-retired member and save any future rate increase.

Membership Application on Reverse Side

For more information contact ISTA-Retired (800) 382.4037 or (317) 263.3400