Instructions: Complete the form below; enclose a check for $428.50 ($257.10 for ESPs), made payable to FEA; mail the form and check to:

FEA
1201 16th St. NW, Suite 117
Washington, DC 20036

Questions: contact Nereyda Jones-Luciano at NJones@nea.org

2023-2024
FEDERAL EDUCATION ASSOCIATION
NATIONAL EDUCATION ASSOCIATION
RETIRED MEMBERSHIP FORM

N/A
LOCAL

N/A
WORK LOCATION

HOME PHONE

PERSONAL (NON DODEA) EMAIL ADDRESS

Last 4 Digits of SSN:

XXX-XX- __ __ __ __
CORRECT / ADD SSN

NAME			
ADDRESS			
CITY STATE		ZIP	

ASSN.	MEMBERSHIP TYPE	AMOUNT
	NEA/FEA RETIRED	428.50
	RETIRED ESP	*257.10*
TOTAL	Certified	428.50
	ESP	*257.10*

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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.

I hereby authorize continuous membership in FEA/NEA and my local association beginning this year and every year hereafter. I may revoke this authorization after one year.

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MEMBER'S SIGNATURE **DATE**