

**West Ellis County Retired School Personnel (WECRSP)—
Texas Retired Teachers Association (TRTA)
Membership Form—Local Dues Only**

Name _____ TRTA # _____

Mailing Address _____

City & Zip Code _____

Email Address _____

Home Phone _____ Cell Phone _____

How do you want to be reminded of monthly meetings?

Check one. _____ email

_____ phone call

_____ do not wish to be contacted

We want you to be a member of our local unit and ask you to choose one of the following options:

_____ Enclosed is my payment for **\$10** for local dues. My state dues are deducted from my monthly paycheck.

_____ Enclosed is my payment for **\$10** for local dues. I have already mailed my state dues to TRTA.

_____ Enclosed is my payment for **\$10** for local dues. I am an At-large TRTA member.

_____ Enclosed is my payment for **\$10** for local dues. My state dues are drafted monthly from my bank.

Please make your check out to West Ellis County Retired School Personnel (WECRSP)-TRTA.

Mail this form and your check to:

**WECRSP-TRTA
C/O Ron Simpson, Treasurer
202 Briggs Street
Waxahachie, TX 75165-2653**