

**Arlington Retired School Employees Association  
Membership form for July 1, 2022 – June 30, 2023**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Telephone \_\_\_\_\_

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Address \_\_\_\_\_ City, ST \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

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I receive or am eligible to receive an annuity from the Texas Retirement System (TRS): \_\_\_\_ Yes \_\_\_\_ No

I am paying for: ____ State Dues \$35 and Local Dues \$10	\$ 45
____ I want a Printed Directory (Digital directory sent free)	\$ 5
____ Donation to Scholarship Fund (write in amount)	_____
____ Donation to Children's Book Project (write in amount)	_____
____ Donation to ARSEA Grant Fund (write in amount)	_____
	Total _____

**Make Check payable to ARSEA** Check# \_\_\_\_\_

Mail To: **ARSEA**  
**4930 Brazoswood Cir**  
**Arlington, TX 76017**

**OR** Credit Card # \_\_\_\_\_  
# on back of card \_\_\_\_\_ Expiration date \_\_\_\_\_  
**A \$1.50 processing fee will be added to CC payments**