



MARYLAND RETIRED SCHOOL PERSONNEL ASSOCIATION (MRSPA)

MEMBERSHIP RENEWAL

(Please Print)

Name _____ Local Association Number _____

Address _____ Telephone _____

City _____ State _____ Zip _____ Email _____

Please sign authorization for Dues Deduction or make check payable to MRSPA.

State Dues \$ 45.00 + Local Dues \$ 10.00 = Total \$ 55.00

DUES DEDUCTION AUTHORIZATION

I hereby authorize the Maryland State Retirement Agency to deduct annual membership dues for the MRSPA and my selected local association from one of my retirement checks each membership year.

I understand that my entire social security number is required if I wish to become a dues deduction member.

SSN: _____

This authorization will remain in effect until cancelled by written notice mailed to the Maryland Retired School Personnel Association (MRSPA).

Signature: _____

Date: _____

LOCAL ASSOCIATIONS AND ANNUAL DUES AMOUNTS (2016-2017)

Table with 4 columns: Association Name, Dues Amount, Association Name, Dues Amount. Rows include Allegany, Anne Arundel, Baltimore City, Baltimore Co., Calvert, Caroline, Carroll, Cecil, Charles, Dorchester, Frederick, Garrett, Harford, Howard, Kent, Montgomery, Prince George's, Queen Anne's, St. Mary's, Somerset, Talbot, Washington, Wicomico, Worcester, Towson Univ., and MRSPA (State Only).

MRSPA dues (\$35) + Local Association dues (\$\$) = Total Annual Membership Dues