



**MAINE SERVICE EMPLOYEES ASSOCIATION
LOCAL 1989, SERVICE EMPLOYEES INTERNATIONAL UNION
65 State Street, Augusta, ME 04330-5126
Phone: 207-622-3151 FAX: 207-623-4916 Website: www.mseaseiu.org**

RETIREE MEMBERSHIP APPLICATION

Name (please print): _____

Street: _____

City/Town: _____ Zip Code: _____

Date of Retirement: _____

Retired from Dept/Organization: _____

Soc. Sec. No: _____

Home Phone: _____ Cell Phone*: _____

E-mail Address: _____

*By providing my cell phone number, I understand that MSEA and MSEA-affiliated organizations and partners may use automated calling technologies and/or text me at that number on a periodic basis to provide me timely and important information. MSEA will never charge for text message alerts. Carrier message and data rates may apply. Text STOP in response to any message to stop receiving text messages.

PAYROLL DEDUCTION AUTHORIZATION

I hereby authorize the Maine Public Employees Retirement System to deduct from my pension the amount of \$6.00 per month as of 1/1/2023 or such amount as may, from time to time, be voted on by the Council of the Maine Service Employees Association as dues for retired members.

I understand that retiree membership in the Maine Service Employees Association is entirely voluntary and that I may terminate my membership by giving fifteen (15) days written notification to the Association, which will notify the Maine Public Employees Retirement System of this action.

Annual retiree membership dues in the Maine Service Employees Association are \$72.00. Of this amount, \$6.00 is for a subscription to the Maine Stater for one year.

Signature of Retiree: _____ Date: _____