



ALIEF AMERICAN FEDERATION OF TEACHERS AND SCHOOL EMPLOYEES

2016 - 2017 RETIREE APPLICATION

Please fill out the application below. Please print clearly. You can remit this application using the following methods:

- (A) Fax: 281-589-6648
- (B) Mail: 12769 Beechnut Blvd., Suite A-600
Houston, TX 77072
- (C) Contact the office at 281-589-6644

DUES PER YEAR

\$60 PER YEAR (no COPE) OR \$72 PER YEAR (Includes \$12 for COPE)

Dues amount payable by check only.

NAME:			PHONE:
ADDRESS:			HOME EMAIL:
CITY:	STATE:	ZIP:	REFERRED BY:

Would you be able to volunteer at your Union office? ____Yes ____No