



Retired Public Employees Council of Washington

Membership Application

Social Security Number: _____
(required for Automatic Pension Deduction)

Name: _____
Last First M.I.

Home Address: _____

Home City: _____ State: _____ Zip: _____

Mailing Address: _____

Mailing City: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

Retirement Date: _____ Birthdate: _____
(MM/YYYY) (MM/YYYY)

Agency Retired From: _____

Select membership option:

Retiree or Surviving Spouse Only - \$7.00 /mo. Retiree & Spouse - \$14.00 /mo.

Spouse Name _____
(Required if selecting Retiree & Spouse option)

(Office Use Only)
Member ID# _____
Chapter # _____
Status: D C CC

Other Information
Female Male
County: _____
Legislative Dist: _____
Congressional Dist: _____
Retirement System:
PERS 1 2 3
TRS 1 2 3
SERS 2 3
Other: _____

Payment Option 1

Authorization for Department of Retirement Systems (DRS) Automatic Monthly Pension Deduction

I authorize DRS to regularly deduct a sufficient amount from my retirement allowance to pay the amount required for my union/organization dues at my request, under this program. Deductions will continue until the deduction plan is canceled through the union/organization office. I understand that DRS cannot answer questions about my union or organization. RPEC is 501c5 organization. Dues are not tax deductible.

Signed: _____ Date: _____

Payment Option 2

Cash/Check - Enclosed is one year's membership dues (\$84.00/year).

Credit Card - I authorize the charge of one year's dues (\$84.00/year).

Billing Address (if different): _____

Type Of Card: Visa Expiration Date: _____

Card No.: _____ 3 Digit Code: _____

Recruited By: _____