

**GWINNETT COUNTY RETIRED
EDUCATORS ASSOCIATION
Membership Form**

Last Name: _____

First Name: _____ M.I. _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____

Email: _____

New Member: _____ ADD _____ Renewal: _____

*Please complete both sides of
this gold form, detach and send
to the GCREA Membership Ch.*

GCREA MEMBERSHIP
Luthenya Wright
3845 Hickory Branch Trail
Suwanee, GA 30024
678-231-6416
luthenya320@bellsouth.net

For GCREA Use Only
ADD Form sent to GRS
_____ Date

CHOOSE OPTION ON BACK OF THIS PAGE

Time to Join GCREA

**GWINNETT COUNTY
RETIRED EDUCATORS
FELLOWSHIP
SUPPORT
SERVICE**

**Automatic Dues
Deduction Available
\$25
(see membership form)
OR
Annual Membership
\$35
Renewable every June!**

www.gcrea.org



Gwinnett County Retired Educators Association
Representing Gwinnett's Retired Educators Since 1972



GCREA



FELLOWSHIP SUPPORT SERVICE

A Non-Profit Association

Joining GCREA Means...

- ◇ *Meeting old friends and making new ones*
- ◇ *Enjoying luncheon meeting and entertaining programs*
- ◇ *Receiving a GCREA handbook, directory, and newsletters*
- ◇ *Participating in community service*
- ◇ *Honoring Emeritus members*
- ◇ *Holding an auction which provides four or more \$1,500 scholarships a year*
- ◇ *Supporting the Ronald McDonald House, Children's Shelter & BookMobile*
- ◇ *Promoting reading during "Gwinnett Reads" month*
- ◇ *Memorializing members*
- ◇ *Keeping up with TRS and retirement issues*

GCREA MEETINGS

A luncheon meeting is held seven times a year where retirees enjoy a great meal, interesting programs, and the fellowship of old and new friends.

Check website for details for meeting dates & place



GCREA Mission Statement

The Gwinnett County Retired Educators Association is committed to uniting retired educators for fellowship, support and continued educational and community service. The association will seek to improve benefits for all retired educators through cooperation with local, state, and national organizations.

GCREA OPTIONS

Continued

Choose from Options below

OPTION 1—BEST ONE!

Gwinnett Automatic Dues Deduction

My signature below authorizes GRS (Gwinnett Retirement System) to deduct \$2.09/month from my GRS pension payment, equaling \$25 annually! This authorization will remain in effect until I choose to terminate it by notice to the Membership Ch. of the Gwinnett County Retired Educators Association.

I understand that this service is provided as a convenience for GCREA and its members by the Gwinnett Retirement System and that GRS assumes no responsibility for my membership in GCREA. All membership issues and transactions, including refunds, remain the sole responsibility of GCREA.

Signature: _____

Date: _____

****Social Security OR Member I.D. Number****

Required by GRS

OPTION 2

**\$35 payable annually
Please enclose a check**

***Detach and send gold form to
GCREA Membership Chair***