

About IRTA

The Illinois Retired Teachers Association is a not-for-profit, non-partisan organization of retired educators. The Association serves the needs and interests of its members through advocacy, education, cooperation and socialization in a flexible organizational structure.

Why Join IRTA Now?

Recent events in public pension and the health benefits arena have highlighted the common interests of retired and employed educators. A currently employed public educator is actually a future retiree. Our issues are the same; namely a fair and secure, defined benefit pension system and a health care system that allows every one affordable health care coverage regardless of when you retire.

Free Pipeline Membership

If you are an Illinois educator within 4 years of retirement and you have signed your letter of intent to retire, you qualify for a free membership from now until you retire.

Let's Get Started

Please fill out the form provided and send it back to the IRTA. Upon your retirement, \$2.50 will be automatically deducted monthly from your TRS pension.

Member Benefits

IRTA provides members with vital information, guidance, and direction through our online advocacy program called Votervoice.

In addition, IRTA has partnered with Association Member Benefits Advisors (AMBA) to make member benefits available to IRTA members.

Don't Wait Until You Retire!

JOIN IRTA TODAY!



IRTA
Illinois Retired Teachers Association
Investing in the future of retired educators.

Illinois Retired Teachers Association



**Free Pipeline
Membership for Current
Educators**

IRTA State Pipeline Membership Form

IRTA

828 S. 2nd St., 4th Floor • Springfield, IL 62704 • 1-800-728-4782
e-mail: irta@irtaonline.org • webpage: www.irtaonline.org

Dues Deduct – I hereby authorize the Teachers' Retirement System to deduct my IRTA dues in monthly installments at an initial rate of \$2.50 or as subsequently established by the Delegate Assembly.

Association Dues are Not Tax Deductible

**Free
Pipeline
Membership**

(Signature required for Dues Deduction)

Social Security # _____

(Only last 4 digits required for Dues Deduction)

Please print or use your return address label.

NAME LAST

FIRST

MI

DOB

ADDRESS

CITY

STATE

ZIP

(required)
RETIREMENT YEAR

PHONE ()

E-MAIL

SCHOOL DISTRICT
RETIRED FROM

IRTA
UNIT

Please mail to IRTA.