

FAMILY MEMBERSHIP DATA FORM

TO THE APPLICANT: This form must be filled out by your <u>Sponsor</u> (MTA Member). Return your completed Data Form to Massachusetts Teachers Association, Attn: Membership, 2 Heritage Drive, 8th floor, Quincy, MA 02171 or <u>membership@massteacher.org</u>.

Applicant's Name	Telephone
Home Address	
Email	
Sponsor Name (Must be an active or retired member)	
Sponsor's Home Address	
Applicant's Relationship to Sponsoring Member	
Signature of Sponsoring Member	
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In making this application for MTA Family Membership, I understa	and that the benefits of such membership shal

In making this application for MTA Family Membership, I understand that the benefits of such membership shall be limited to the special services programs for which the Family member is eligible. Visit <u>www.mtabenefits.com/benefits/family-members</u> for details.

Date

Signature of Applicant

Family membership is available to family members of an active, retired, or deceased member who are (a) not otherwise eligible for active or retired membership, and (b) who are sponsored by an active or retired member. Family members are defined as mother, father, sister, brother, son, daughter, grandchild and the spouse or domestic partner of an active, deceased active, retired or deceased retired member who is not otherwise eligible for active or retired membership.