



2026 A-PLUS OFFICIAL MEMBERSHIP APPLICATION

This form must be filled out every year. Failure to do so will impact your A-PLUS mailings.

ACTIVE MEMBER: An active member is a career or retired PCES or EAS Postal Service Employee, who meets all financial requirements for the current year, the fee is \$100.

ASSOCIATE MEMBER: An associate member is a member who is a non-PCES/EAS employee and/or non-postal individual who is interested in supporting the goals of this Organization, the fee is \$50.

INITIATION FEE: A one-time initiation fee is assessed to each new member, both active and associate, and must be paid prior to becoming a member in good standing with the Organization, the fee is \$25.

PLEASE PRINT CLEARLY

NAME (Last, First, and Middle Initial)

Do you want to receive the "Between the Lines" National magazine via U.S. Mail or electronically? Mail ___ Electronically ___

Home Address

City and State, Zip plus 4

Title (Indicate if Retired)

Postal Facility Address

City and State, Zip plus 4

Home phone or cell: ___ Office Phone: ___

Personal Email Address: ___ Please Do not use the Postal Service e-mail system!

Chapter Affiliation: ___ or I want to be a member-at-large in the ___ Region.

A-PLUS may provide our sponsors my mailing. (Check one) Yes ___ No ___ Failure to check is an automatic yes!

Are you a new member? Yes ___ No ___ Are you a Retired Postal Employee? Yes ___ No ___

FOR NEW MEMBERS ONLY: Recommended by: ___ Chapter: ___ (APPLIES ONLY IF NEVER BEEN A MEMBER OF A-PLUS)

TYPE OF MEMBER: Indicate amount paid and check all that applies in the block below:

TYPE OF MEMBER: Active \$100 _ Associate \$ 50 _ Initiation Fee \$ 25 _ Total Enclosed \$ ___ Make check payable to A-PLUS and give both the check and completed application to your local Chapter Treasurer. They will verify contact information as accurate. You may also pay dues by credit or debit card online at aplus.cc. Check applicable block(s)

Chapter Treasurers, please send the original application form and check to the National Treasurer at PO Box 13211, Wilmington, DE 19850. Send a copy to your Regional Treasurer. Please do not alter this application.