

# CONGRATULATIONS ON YOUR RETIREMENT

*Join Today To Explore A New World of  
Member Travel and Lifestyle Benefits*

*I have just recently retired and  
joined the association and am  
so glad I did. So many benefits:  
PostScript magazine, conference,  
opportunities for travel insurance  
and a great deal of information  
whenever I ask.*

*Unsolicited member feedback*



## BCRTA

BC Retired Teachers' Association

**TEST  
DRIVE**

**Your 1st Year  
100% Free!**



# BCRTA OFFERS A WORLD OF BENEFITS

## LOOKING OUT FOR YOU, WITH A POSITIVE VOICE



The BCRTA is here to make your retirement the best it can be! **All educators and staff are eligible for membership.**

Enjoy a "Test Drive" year of membership at no cost! The basic annual fee is just \$56.

Your association provides timely support and opportunities for a wealth of new experiences. We speak up for our members' rights and the public interest, including:

- **protection** of your pensions and benefits
- **representation** on the Teachers' Pension Plan Board of Trustees
- **advocating** for strong public education
- **a non-partisan** voice for public health and social justice
- **national and international** partnerships
- **a positive force** for your well-being

## BCRTA ADVANTAGE PROGRAM

Members receive special offers on many goods and services, including:

- *discounts on retail, phone, hotels and travel*
- *free evaluations and special offers from vision and hearing care providers*
- *exclusive group departure trips*
- *special offers on travel and learn vacations and escorted tours*

## PUBLICATIONS AND MEDIA EVENTS



## AVAILABLE TO BCRTA MEMBERS ONLY

*Have peace of mind with quality Extended Health Care Coverage and Travel Insurance, tailored by BCRTA for the needs of retired educators. A recent survey of retirees rated BCRTA-Johnson Prestige the best EHC experience in 21 of 21 categories. This plan offers comprehensive coverage and superior service.*



### BCRTA PRESTIGE EHC & TRAVEL INSURANCE IN 1

- Coverage regardless of age or health status
- Best rated EHC plan by our members, including ease of claims and support
- 80% coverage for wide range of health expenses, **\$250,000** lifetime EHC maximum
- **No** 90-day stability clause
- CHOICE OF TRIP LENGTH: Unlimited number of 62 DAY out-of-province/ country trips. Or choose coverage up to 93 days per trip.
- \$10 MILLION emergency medical coverage per insured person, per policy year including coverage for COVID-19 related incidents
- \$8,000 trip cancellation, interruption and delay benefits per person, per trip

### OR CHOOSE MEDOC TRAVEL

- An affordable stand-alone TRAVEL plan
- \$10 MILLION medical coverage
- Unlimited number of international 17 or 35 day trips. Longer trip coverage available.
- \$8,000 trip cancellation, interruption and delay benefits per insured person, per trip
- Protects your EHC lifetime maximum



### HOME INSURANCE

- \$30,000 Identity Theft included
- 50+ Benefits – Nursing, legal, etc.
- First claim forgiveness
- 5% DISCOUNT if you have BCRTA EHC

### DENTAL AND LIFE INSURANCE

- Choose the coverage that meets your needs

### TRIP CANCELLATION AND INTERRUPTION

- Up to \$12,000 trip cancellation, interruption and delay benefits per insured person, per trip



# MEMBERSHIP APPLICATION

REVISED 2024

## BRITISH COLUMBIA RETIRED TEACHERS' ASSOCIATION

100 - 550 WEST 6<sup>th</sup> AVENUE · VANCOUVER BC · V5Z 4P2

TEL 604.871.2260 OR TOLL FREE 1.877.683.2243

office@bcрта.ca



APPLY ONLINE IN 2 MINUTES: [bcрта.ca/join](https://bcрта.ca/join)

Last Name:

First Name:

Retired from SD #

### CONTACT INFORMATION

Unit and Street Number or P.O. Box

City

Province

Postal Code

Birthdate

DD/MM/YYYY

Telephone

Email

### PAYMENT METHOD (TPP AUTOMATIC WITHDRAWAL APPLIES TO THOSE RECEIVING A PENSION)

Your first year of membership is free. You must provide payment information to join. You may cancel at any time.

BC TPP Person ID\*

\* The 8 digit BC Teachers' Pension Plan Person ID as shown on TPP Member's Benefit Statement, Enrollment Statement or Pension Statement.

IF NOT Visa/MasterCard

ON TPP Exp MM/YY

CVS

### ACTIVE MEMBERSHIP

(May vote and hold office in the BCRTA and/or its Branches, and access all benefits. Choose ONE below.)

- ☐ I receive a pension from the **BC Teachers' Pension Plan**, or
- ☐ I am the spouse of a deceased Active/Life member
- ☐ I receive a pension from the Teachers' Pension Plan of \_\_\_\_\_ (province)

### ASSOCIATE MEMBERSHIP

(Access to benefit and affinity plans, but may not vote or hold office in the BCRTA and/or its Branches. Choose ONE below.)

- ☐ I am the spouse/partner of an Active, Life, or Associate BCRTA MEMBER  
MEMBER'S NAME \_\_\_\_\_ MEMBERSHIP # \_\_\_\_\_
- ☐ I am a retired  
**faculty member of** ☐ university ☐ college ☐ other post-secondary  
**educator at** ☐ independent ☐ private school ☐ certified pre-school
- ☐ I retired from the non-educator staff of:  
☐ BCTF ☐ a BCTF local ☐ BCSSA ☐ BCPVPA ☐ TQS
- ☐ I retired from employment in a K-12 school system or a post-secondary institution  
Position: \_\_\_\_\_ Institution: \_\_\_\_\_
- ☐ I am currently employed in education, and when I retire I will qualify for one of the categories above.  
Until then I wish to have access to BCRTA member benefits.  
Position and where employed: \_\_\_\_\_

## POSTSCRIPT MAGAZINE & BCRTA CONNECTIONS NEWSLETTER

POSTSCRIPT: ☐ Email

☒ Print version (Canada Post, included)

☐ My spouse is a BCRTA member and we prefer one printed copy.

Spouse/partner's name or membership number \_\_\_\_\_

CONNECTIONS E-NEWSLETTER\* ☒

## MEMBERSHIP FEES AND BENEFITS

- receive BCRTA publications
- join a local BCRTA branch
- access Members' Advantage program offers\*
- enroll in BCRTA insurance and benefits programs, including:
  - extended health and dental
  - travel insurance at preferred rates
  - home and life insurance plans

\* You will have the ability to manage your mailing lists.

## THE RR SMITH MEMORIAL FUND

is a separate body, founded by the BCRTA, which works alongside BCRTA in advocacy and philanthropic efforts in Canada and around the world. Membership in the RR Smith Memorial Fund has a nominal **annual fee of \$5**. Your first year is free.

☐ **YES**, I want to also join the RR Smith Memorial Fund, with no fee for the first year.

## AUTHORIZATION

I understand that upon joining the BCRTA I am authorizing the Association to use my name and contact information for purposes related to the administration of the BCRTA and its member benefit programs, including the RR Smith Memorial Fund Foundation and that the **BCRTA will not share this information** with other persons or organizations without my consent.

Effective July 1st of the second year of my membership, unless I have contacted the office to cancel my membership, I will remit fees annually. Fees will be paid by a pre-authorized deduction from the BC Teachers' Pension Plan September payment, or for those not receiving a pension can be paid annually by credit card or cheque. (Members who pay by cheque or credit card will receive notice of billing from the BCRTA.)

## ACCEPT THE SPECIAL OFFER

## SAVE \$56+

☐ **YES**, I want to join BCRTA with **no membership fees** for the first year!

As a BCRTA member, I would like to join Branch(es) \_\_\_\_\_ with **no membership fees** for the first year. (Branch membership is optional. See branches and future fees below.)

ABBOTSFORD	\$10	COWICHAN VALLEY	\$6	LOWER VAN ISLAND	\$10	PRINCE RUPERT	\$5
ALBERNI	\$5	CRANBROOK	\$10	MISSION	\$10	QUESNEL	\$5
BOUNDARY AREA	\$5	CRESTON	\$10	NANAIMO/LADYSMITH	\$12	RICHMOND	\$10
BULKLEY VALLEY	\$5	DELTA	\$8	NEW WESTMINSTER	\$10	RIDGE MEADOWS	\$8
BURNABY	\$10	ELK VALLEY	\$5	NICOLA VALLEY	\$10	SHUSWAP & DIST	\$5
CAMPBELL RIVER	\$5	GULF ISLANDS	\$5	NORTH COAST	\$7.50	SOUTH OKANAGAN	\$5
CARIBOO/CHILCOTIN	\$10	KAMLOOPS/THOMPSON	\$5	NORTH SHORE	\$10	SUNSHINE COAST	\$10
CENTRAL OKANAGAN	\$5	KIMBERLEY	\$8	PARKSVILLE/QUALICUM	\$10	SURREY	\$10
CHILLIWACK	\$10	KITIMAT	\$5	PEACE RIVER N.	\$5	VANCOUVER	\$12
COLUMBIA VALLEY	\$10	KOOTENAY/COL.	\$5	PEACE RIVER S.	\$5	VAN ISLAND NORTH	\$10
COMOX	\$10	KOOTENAY LAKE W	\$10	POWELL RIVER	\$10	VERNON	\$5
COQUITLAM	\$5	LANGLEY	\$10	PRINCE GEORGE	\$10	WINE COUNTRY	\$5



\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Mail to our office **OR** take a photo of the form and email to [office@bcrt.ca](mailto:office@bcrt.ca) **OR** you can complete this form online in 2 minutes at [bcrt.ca/join](http://bcrt.ca/join).