

# SPRING 2023 COURSE REGISTRATION

CHECK ONE:  UFT MEMBER  SPOUSE (use separate coupon)

CHECK ONE:  NYSUT  AFT  PSC

MEMBER NAME (PLEASE PRINT) \_\_\_\_\_

UFT ID # (6 digits)/SS # (last 4 digits) \_\_\_\_\_ PHONE \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

SPOUSE NAME (IF REGISTERING) \_\_\_\_\_

ADDRESS \_\_\_\_\_ APT # \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**Seminars (not included in five-course limit).**

NUMBER	TITLE	FEE (IF ANY)
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

**DID YOU REMEMBER TO:**

- ✓ Sign your check(s)/money order(s)
- ✓ Make the check(s)/money orders(s) payable to  
**UFTWF RETIREE PROGRAMS AND MAIL TO**  
**52 Broadway, 17th Floor, NY, NY 10004**
- ✓ **Complete the information on the coupon**
- ✓ Provided the correct course/seminar/trip code(s) and title(s)
- ✓ Do not fill information in for spouse, unless he/she is registering for programs
- ✓ You must send in a separate form for your spouse
- ✓ MEMBERS CANNOT PAY FOR OTHER MEMBERS

**You may register for up to 5 courses only. Add 2 alternates in case first choices are filled. List in order of preference:**

NUMBER	TITLE	FEE (IF ANY)
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
ALTERNATES:		
6.	_____	_____
7.	_____	_____

**You may register for only *five* trips. Add 2 alternates in case first choices are filled. List in order of preference:**

NUMBER	TITLE	FEE (IF ANY)
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
ALTERNATES:		
6.	_____	_____
7.	_____	_____