



Form 2, Rev 4/2/01

## APPLICATION FOR MEMBERSHIP OR TRANSFER SONS IN RETIREMENT

A Non-Profit Public Benefit Corporation For Retired Men Devoted to the Promotion of Independence and Dignity of Retirement

_	LAKE OF TER PINES Branch Name		Branch <u>/7</u> 6 No.		
Please <b>print</b> the fo	ollowing inform				
Your first name	Initial	FIBS Last Name	Nickname (Ca	Milime) Wife's or Pr	Pac artner's first name
		PTUS CT	_	_	5602-8226
	ess (Street, No., Apt)	•	City		Zip Code
Mailing Address (if (520) 248	different than your Ho	ome Address) GM C53 GM L BBS GAW HA E-Mail	LALL COM City  SAMEDIA TV 9  tom Bir	-22-44 (	Zip Code  L - Z 3  edding Anniversary
I attended a luncheon meeting on: and I have retired from full time employment. I am aware that regular attendance is essential for continued membership.					
Applicant's Sig	Her 1	1-5-01 Date	- The Bre Sponsor	က် 's Signature	Badge Number
I am	a new member.	·	I am transferring	from:	
The following info	mation will he	elp us introduce yo	ou to new friends a	and make you	aware of our
Former Business	Connection: _	Occupation		Company or Organiz	eation
Date you retired:	7-97	<del></del>			
What are your Ho	bbies and Inte	erests?	06=		
Ja Orac	For Membe	ership Committee	Chairman:		
AND MAC			Date	2-2-	05