

FEDERAL PRISON RETIREES ASSOCIATION ENROLLMENT FORM

Membership dues are \$20 per year for a retiree or associate and \$15 per year for a surviving spouse of a retiree. Annual dues cover January 1 – December 31. Spouses have participation/voting rights in the FPRA. Surviving spouses with a paid membership will have participation/voting rights. Your completed enrollment form and check payable to **Federal Prison Retirees Association should be mailed to: FEDERAL PRISON RETIREES ASSOCIATION, POST OFFICE BOX 194, LOVEJOY, GEORGIA 30250-9998.**

TYPE OR PRINT ALL INFORMATION RETIREE: NEW /__ / RENEWAL /__ /

PAID LIFE MEMBERSHIP /__ / info on website, fbopretirees.org, or contact Treasurer.

SURVIVING SPOUSE: NEW /__ / RENEWAL /__ /

RETIREES or ASSOCIATE* NAME _____

SPOUSES NAME _____

ADDRESS _____
(NINE DIGIT – ZIP CODE)

RETIRED FROM or Current (INSTITUTION/OFFICE) _____
RETIREMENT DATE _____

TELEPHONE # _____ EMAIL ADDRESS _____

MEMBER OF A LOCAL FPRA CHAPTER – YES /__ / NO /__ /

NAME OF CHAPTER _____

TELEPHONE NUMBERS WILL BE PUBLISHED IN THE ANNUAL DIRECTORY. Under provisions of the Privacy Act of 1974, the Federal Prison Retirees Association has my permission to publish my name, spouse's name, address, retiring institution, email, and phone number in directories, organizational publications, and newsletters via email; secure website; compact disc or other means used by the FPRA.

/__ / YES /__ / NO – FPRA MEMBER'S SIGNATURE & DATE _____

***Associate Members Do Not Have Voting or Participation Rights in the operation of the FPRA.**