

TWU RETIREES MEMBERSHIP APPLICATION

1. Complete the enrollment form on right.
2. Make check or money order payable to:

TWU Local 100 Retirees Association

3. Send to:

**TWU Local 100 Retirees Association
195 Montague st, 3rd Fl.
Brooklyn, NY 11201**

Membership type (check one)

- ☐ **INDIVIDUAL MEMBERSHIP** - \$50 Annually
- ☐ **MEMBER & SPOUSE** - \$85 Annually

Name (please print) _____

Social Security Number _____

Address _____

City _____ **State** _____ **Zip** _____

**Area Code and
Phone No. ()** _____ **Date of Birth** _____

Local _____ **Pass#** _____

Spouse's Name _____ **Date of Birth** _____

Spouse's Social Security Number _____

Email address _____

☐ **Check if interested in Dental and Vision**