

**PUTNAM COUNTY RETIRED TEACHERS' ASSOCIATION
REGISTRATION FORM
2016-2017 SCHOOL YEAR**

NAME _____

**PLEASE ONLY FILL IN BELOW IF THERE HAS BEEN ANY CHANGES
OTHERWISE LEAVE BLANK:**

STREET ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

YEAR RETIRED _____ **SCHOOL SYSTEM** _____

EMAIL ADDRESS (IF CHANGED): _____

**DUES ARE \$12 PER MEMBER—CHECK SHOULD BE
MADE PAYABLE TO PCRTA**

PLEASE USE A SEPARATE REGISTRATION FORM FOR EACH MEMBER

**MAIL TO: NANCY KELLER
15 EQUESTRIAN WAY
POUGHQUAG, NY 12570**

OVER 80 NO DUES REQUIRED—PLEASE CHECK THIS BOX
(please still fill out a form!)



PLEASE! PLEASE! PLEASE!
HELP US SAVE ON POSTAGE.
PROVIDE US WITH YOUR EMAIL
ADDRESS!
THE LESS WE SPEND ON
POSTAGE, THE MORE WE HAVE
FOR SCHOLARSHIPS!