



**2023-2024 KRTA MEMBERSHIP CASH ENROLLMENT FORM**

NAME \_\_\_\_\_ TRS ID # \_\_\_\_\_

ADDRESS \_\_\_\_\_

Street and Number, Box or Route Number

State

Zip Code

( )

Phone Number

Email Address

City or Town

County Retired Teacher Association

I am enclosing my Check # \_\_\_\_\_ for \$20 to pay my membership in the Kentucky Retired Teachers Association for the period ending June 30, 2024. I am a: \_\_\_ New Member \_\_\_ Renewal \_\_\_ Associate Member

Date Of Retirement: \_\_\_\_\_

KRTA dues are not deductible as a charitable contribution for income tax purposes

**Serving Retired Teachers Since 1957**

**SEND FORM AND CHECK TO THE ADDRESS BELOW:**

Kentucky Retired Teachers Association

7800 Leaders Lane

Louisville, KY 40291

Phone: (502) 231-5802 or 1-800-551-7979