

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 member	ership in the Kentucky R	Retired Teachers Association
Date Of Retirement:	I am a: New Memb	oer Renewal _	Associate Member
KRTA dues are not deductible as a charita	able contribution for income tax purposes	SEND FORM AND CHE	CK TO THE ADDRESS BELOW:
Serving Retired Teachers Since 1957		Kentucky Retired Teachers Association 7800 Leaders Lane Louisville, KY 40291	
		Phone: (502) 231-5802 or 1-800-551-7979	