



University of Iowa Retirees Association

Membership Form

July 1, 2019 to June 30, 2020

Please **print** or **type** everything.

Membership Dues:

_____ \$10 Per Person for 1 Year

_____ \$25 Per Person for 3 Years

Note about membership dues:

The membership year is from July 1 to June 30 of the following year. Dues are \$10 for 1 year or \$25 for 3 years upon joining.

Name _____

Address _____ City: _____ State: _____ Zip: _____

E-Mail Address _____

(Used for e-mail delivery of UIRA messages and *The Gray Hawk* newsletter)

Telephone _____

If this is a new membership, please complete the following:

Retiree Status: Faculty _____ Staff _____

Spouse/Domestic Partner _____ Associate Member _____

UI Department/Division from which you retired _____

Complete the following for a second person's membership

Name _____

E-Mail Address _____

Telephone _____

If this is a new membership, please complete the following:

Retiree Status: Faculty _____ Staff _____

Spouse/Domestic Partner _____ Associate Member _____

UI Department/Division from which you retired _____

Send completed form and checks, payable to **University of Iowa Retirees Association**, to:

UIRA

PO Box 1952

Iowa City, Iowa 52244-1952

Questions? See website at uira.org.uiowa.edu