



University of Iowa Retirees Association

Membership Form

July 1, 2018 to June 30, 2019

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

Membership Dues:

_____ \$0 **New Membership is FREE** for First Year
 _____ RENEWAL: \$10 Per Person for 1 Year
 _____ RENEWAL: \$25 Per Person for 3 Years

Note about membership dues:
 If this form is processed in April, May or June, membership will cover the next academic year.

Name _____

Address _____

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 <http://uira.org.uiowa.edu/>