

Application For Membership
Massachusetts Retirees United
314 Main Street
Unit 105
Wilmington, MA 01887

Check one: New Member _____ Renewal _____

Name _____

Address _____

City, State, ZIP _____

Phone Number _____ Email Address _____

Retiring From _____

Date Retired or Retiring _____

One year membership \$20

Two year membership \$35

Please enclose a check payable to:
Massachusetts Retirees United

Send the form to
Massachusetts Retirees United
P.O. Box 4015
Chelmsford, MA 01824-0615

Please do not send cash.