



Michigan State Police Troopers Association Retiree Associate Membership Application

Membership Year: July 1, 2018 – June 30, 2019

Retiree Name _____
Last First Middle (Name / Initial)

Spouse's Name _____
Last First Middle (Name / Initial)

(D) Deceased / (SS) Surviving Spouse – If you are the Surviving Spouse of a Retired Member, Skip to Box B

BOX A

Date of Birth _____

Recruit School # _____

Retirement Date _____

Rank at Retirement _____

BOX B

Trooper Magazine & Pocket Calendar

Michigan Trooper magazine

YES, I prefer a printed copy – please send by mail.

Electronic preferred – I can view on the MSPTA website.

*(*No printed copy will be sent. Magazines are posted on the website after each issue is published.)*

Pocket Calendar (mailed at year end) YES NO

BOX C

Please Complete/Verify Address Information

Permanent Address _____
Street

_____ City State Zip

Phone _____ (Current number – may be land line or cell phone.)

(Please disregard if your email address appears in all capital letters, this is a default function of our database.)

E-mail Address _____

I NO LONGER WISH TO BE INCLUDED ON THE MSPTA'S MAILING LIST, PLEASE REMOVE MY NAME FROM ALL FUTURE MAILINGS.

Associate Membership Renewals are due now.

Please remit your renewal ASAP. Thank you!

RETIREE MEMBERSHIP DUES THROUGH JUNE 30, 2019

\$15 if retired prior to October 1, 1987

\$40 if retired on or after October 1, 1987

\$0 (NO FEE) Surviving Spouse of a Retired Member

By Mail: Check or Money Order Only

On Line: Credit card payments can be processed at www.mspta.net.

Please note that up to 50% of your dues payment may be used for the Michigan State Police Retirees PAC.

Payable to: MSPTA Retirees Check# _____

Additional PAC Donation \$ _____

Total Amount Enclosed \$ _____

FOR OFFICE USE ONLY

ENTERED