

RETIRED EDUCATORS OF NY NEW MEMBER 3 YEAR ENROLLMENT FORM

Name (circle one) Mr. Miss Mrs. Ms. Dr. _____

Address _____

City _____ State _____ Zip Code _____

Telephone (____) _____ Date of Birth _____ Email _____

(Check one) Retired Educator _____ Active Educator _____ Associate (non-certified support staff) _____

Year Retired _____

County of Residence _____ School Dist./College/Univ Retired From _____

Subject Area _____ Level Taught _____ Level of Admin if Applicable _____

Referred By: (if applicable): _____

Spouse Enrollment

Spouse Name (circle one) Mr. Miss Mrs. Ms. Dr. _____

Date of Birth _____ Email _____

Retired Educator? Yes No (year retired) _____ Active Educator? Yes No State Retired From _____

School Dist./College/University Retired From _____

Payment Options

I have enclosed my check or money order made out to RENY in the amount of: \$75.00 per member .

This 2021 promotion begins January 1st, 2021 and is for a three year NEW membership only. You will be billed in 2024 at the regular ANNUAL dues rate for that year. This promotion expires on December 31, 2021.

Mail Completed application and payment to:

RENY

Attention Kathi Bassett

P.O. Box 490

Amsterdam, New York 12010



**The ONLY statewide organization
which works solely on behalf
of retired educators!**