



Allegheny County

Retirees Association

NEW MEMBER APPLICATION

Members receive newsletters, luncheon reminders, and voting privileges.

Please Print Clearly

Last Name:		First Name:	
Address:			
City:		State:	
		Zip Code: <small>(9 digit if possible)</small>	
Telephone No.			
		Cell Phone No.	
Email Address:			
Department You Retired From:		Year of Retirement:	

ANNUAL DUES ARE \$15.00

Join by mailing your completed form and check made payable to ACRA
to the following address:

ACRA
PO Box 112615
Pittsburgh, PA 15241-0215