

# **TEXAS STATE IAMAW RETIREES CLUB**

## **MEMBER REGISTRATION FORM**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

(if you have one)

**AN ANNUAL DONATION OF \$12.00 IS SUGGESTED**

**HELP US MAKE EVERY DONATED MINUTE AND PENNY COUNT.**

**NOT WHY BUT WHY NOT?**

**The purpose of our program is to:**

1. Foster fraternal ties of IAM members into the years of retirement.
2. Keep retired members informed of IAM programs, policies and objectives.
3. Keep IAM informed of special problems of its retired members.
4. Enlist support of retired members for IAM objectives.
5. Provide retired IAM members with useful social and recreational facilities and opportunities.
6. Help retired IAM members to secure adequate housing, medical care, drugs and other consumer services.

I understand the objectives of the the Texas State Retirees Club and I care about other retirees. \_\_\_\_\_

\_\_\_\_\_  
signature

\_\_\_\_\_  
date