



6074 Heatherfield Ct.  
Harmony, PA 16037  
724-816-0142  
nar@naretired.org

## Application for NAR Membership

- Print this form and complete it.
- Enclose a check for \$20.00 for your first year of membership.
- Mail form and check to: NA Retired, 6074 Heatherfield Court, Harmony, PA 16037

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email (*will save \$ on expenses*) \_\_\_\_\_

Retirement Date \_\_\_\_\_

### Please check:

[ ] I am joining and have enclosed my initiation dues of \$20.00.

[ ] I would appreciate a phone call so that I can ask questions.

Please let us know how you think an association for your fellow NA retirees could serve you.

Please also indicate how you might be willing to help this group of your fellow retirees.