



# CWA RETIRED MEMBERS CHAPTER 1180

6 Harrison Street, New York, N.Y. 10013-2898

212.331.0934

## MEMBERSHIP APPLICATION 20\_\_\_\_\_

Current Member

Dues: \$15.00 Jan-Dec 20\_\_\_\_\_

New Member

COPE:\$1.00 Voluntary

Please fill out form electronically or PRINT IF HANDWRITING

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Apt: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

Email: \_\_\_\_\_

Agency Retired From: \_\_\_\_\_ Year: \_\_\_\_\_

Make check or money order for \$15.00 or \$16.00 (if including COPE donation) payable to  
CWA Retired Members' Chapter 1180 and mail to CWA Retired Member Chapter,  
6 Harrison Street, New York, NY 10013

COMMENTS/QUESTIONS:


### Office Use Only

Check Date	Check/MO #	\$/Check/MO #	N/C	Your Initials
Check to Bank	Posted	Card & Items	Mailing Date	