

TO ALL CITY OF TUCSON
RETIREES The voice of CTRA is most
effective
when it serves as the voice of many
especially when the Association
pursues increased pension benefits.
BECOME A MEMBER TODAY!
CTRA MEMBERSHIP APPLICATION
AND RENEWAL FORM

DATE _____

NAME _____

BIRTHDATE _____

ADDRESS _____

ZIP _____ TELEPHONE _____

E-MAIL ADDRESS _____

SPOUSE _____ BIRTHDATE _____

DATE HIRED BY CITY _____

DEPARTMENT _____

DATE RETIRED _____

DEPARTMENT _____

_____ Enclosed is \$6 for Annual Dues
(Make check to CTRA)

(COMPLETE ONLY FOR PAYROLL DEDUCTION)

_____ I authorize deduction of \$.50 per
month from pension check

SIGNATURE _____

(Required for Payroll Deduction)

MAIL TO: KRIS LIBERTY
CTRA Membership
2951 W. Alaska
Tucson, Arizona 85746

Kris Liberty, 520-883-7883,
e-mail -kris_liberty@msn.com