

Membership Card

**Delaware Retired School
Personnel Association**

Your Name

is a member in good standing.

Membership expires
December 31, 2018

P.O. Box 7262
Wilmington, DE 19803
(302) 674-8252

Website: drspa.org
email: email@drspa.org

Cut along line and retain 

Ms. Miss Mr. _____

2018

Mrs. Dr. _____
Last Name First Name M.I.

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Retired from which School District/Agency _____

I would like to receive communications by email

<input type="checkbox"/> Life Membership	\$ 250.00
<input type="checkbox"/> Annual Membership	\$ 30.00
<input type="checkbox"/> Contribution for Legislative Activity	\$ _____
<input type="checkbox"/> Archie R. Jordan Memorial Awards Fund	\$ _____
	Total ... \$ _____

Check here to volunteer your help

*Complete and return the membership card, enclose your check payable to
DRSPA and mail to: DRSPA, P.O. Box 7262, Wilmington, DE 19803*