



Retired Members Division Application Form

Date: (mm/dd/yyyy) _____

Full name: _____

Home phone number: _____

Date retired from OPSEU: (mm/dd/yyyy) _____

Union #: _____

Email address: _____

Address

Street: _____ Unit/Apt #: _____

City: _____

Province : _____ Postal code: _____

Local #: _____

Check one:

OPS BPS CAAT Academic CAAT Support LBED

Name of last employer: _____

For a lifetime membership send a completed application form along with a cheque or money order made payable to OPSEU in the amount of \$10.00 to Retired Members Division, OPSEU Head Office, 100 Lesmill Road, Toronto, Ontario M3B 3P8.

Locals are encouraged to present a lifetime membership to local retirees and to send in the application form with \$10.00.

If you have any questions please contact Head Office at our toll free number:
1 800 268-7376 extension 3352.