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NATIONAL ASSOCIATION OF RETIRED POSTAL INSPECTORS APPLICATION FOR REGULAR MEMBERSHIP

Regular membership in the Association shall consist of Retired Postal Inspectors, including retired persons who served as Postal Inspectors under permanent appointment and left under honorable circumstances, and those persons, now retired, who served at least five (5) years in the position of Investigative Aide, Special Investigator or Document Examiner (Analyst), or who retired directly from such position under honorable circumstances.

FULL NAME: _____ TEL: _____

(Please type or print.)

STREET ADDRESS: _____

CITY: _____ STATE: _____ 9-digit ZIP: _____

INSPECTION SERVICE DATES: From _____ To _____

DIVISIONS ASSIGNED: _____

I qualify for membership because I held the position of _____

If service includes other positions in the Inspection Service or USPS, please describe below.

DATE RETIRED: _____ E-mail Addr.: _____

By entering my initials in the following space (_____) I hereby authorize the inclusion and intra-organizational dissemination of my E-mail address via the NARPI E-mail Directory.

Retirees' spouses become regular members as soon as the retiree's membership becomes effective. Please show spouse's name, if applicable.

SPOUSE'S FULL NAME: _____

(Please type or print.)

Applicant's Signature

Date

ANNUAL DUES: \$30.00 (includes spouse, if applicable)

Dues enclosed: \$_____ (First year's dues must accompany application.)

Mail completed application and dues to:
NARPI National Treasurer, PO Box 400, Shallotte NC 28459-0400

Recorded: _____

Treasurer

_____ Date

twb/10-15-19