



Public Employee Retirees, Inc.  
800-247-7374 • www.operi.org

## Follow the 4 EASY STEPS

Public Employee Retirees, Inc.  
659-F Park Meadow Road  
Westerville, Ohio 43081-2879  
800-247-7374

### STEP 1: TELL US WHO YOU ARE

First \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_ Date Retired \_\_\_\_/\_\_\_\_/\_\_\_\_

County \_\_\_\_\_ Last 4 Digits Soc. Sec. No: \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Email: \_\_\_\_\_  OPT. IN to E-mailed Newsletter and Other Communications

I WOULD LIKE TO SAVE PERI MONEY AND RECEIVE NEWSLETTERS ELECTRONICALLY

### STEP 2: CHOOSE YOUR MEMBERSHIP

Annual Membership \$30 Open to retirees and active OPERS members (Chapter membership included) ..... \$ \_\_\_\_\_  
or

Life Membership \$300 (Open to retirees only) ..... \$ \_\_\_\_\_  
and

Associate Membership \$15 (Open only to spouses who are **NOT** OPERS members) ..... \$ \_\_\_\_\_  
(Surviving spouses must join as annual members)

Optional Gift (Your gift helps us fight to protect your pension) ..... \$ \_\_\_\_\_

Please Do **NOT** Send Cash (Dues are not tax deductible) TOTAL ..... \$ \_\_\_\_\_

### STEP 3: MAKE YOUR PAYMENT

Make check payable to P.E.R.I. Put this form  
**and** your check in an envelope.

**OR**

Fill out your credit card information  
below. Put this form in an envelope.

**Mail To:**

Public Employee Retirees, Inc.  
659-F Park Meadow Road • Westerville, Ohio 43081-2879

**Please stamp and mail today!**

#### PAYING BY CREDIT CARD

Amount: \$



Card#

Expiration date: \_\_\_\_/\_\_\_\_/\_\_\_\_ CVS

Cardholder signature: \_\_\_\_\_ Not necessary when paying online

Print name of cardholder: \_\_\_\_\_

### STEP 4: ADD and or UPDATE IMPORTANT INFORMATION

**Associate Member Info** Name \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Last 4 Digits Soc. Sec. No: \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_

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

If you would like to receive mail at your seasonal address please mark dates the seasonal address dates \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Please fill in the address below)

STREET \_\_\_\_\_ APT#: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_