



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, active OPERS members and any other persons interested in the corporation and its purpose, **Chapter membership included**)..... \$ _____

or
☐ Life Membership \$300 (Open to retirees only)..... \$ _____
and

☐ Associate Membership \$15 (Open to anyone wanting to support our mission)..... \$ _____
(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: _____