## Honorary Retiree Chapter Membership Application



Contact Information		
Name		
Street Address		
City ST ZIP Code		
Phone		
E-Mail Address		

## Personal Information

Retirement Date	
Retired Article 15 Title	
Time in Article 15 Title	
Previous NYSCOPBA Title and Facility	
Time in NYSCOPBA Title	
NYSCOPBA positions held	
(Steward etc)	

**Per Article III of the NYSCOPBA Constitution and Bylaws**, honorary membership shall be open to those individuals who have been determined by the Association to have made **outstanding contributions** to the Association or its members. Please summarize the outstanding contributions you have made to NYSCOPBA or its members. *All contributions must be able to be verified or supporting documentation must be submitted with this application.* 

## Signature

By submitting this application, I affirm that the facts set forth in it are true and complete.