Retired Professionals Society Membership Renewal Form, 2025-2026

- o Membership Year is concurrent with Fiscal Year, July 1 June 30
- o Dues notices are sent in May.
- o Prompt payment before the beginning of the new Fiscal Year on July 1 is always appreciated.

<u>To renew by US Mail and pay by check</u>: Complete this form and mail with your payment to the address below.

<u>To renew online and pay by PayPal or by credit card</u>: Use <u>this link</u> or type <u>https://rpsociety.org/members/member-renewal/</u> into your browser. You will not need to fill out and mail this form.

Required fields are indicated with asterisks (<i>(*)</i> .	
Member #1		
*First Name	*Last Name	
Member # 2 at same address (if applicable)		
*First Name	*Last Name	
*Are there any changes to the primary conta	act information you have previous	sly submitted for the RPS database?
No Yes If yes, please	note the changes here:	
Member #1		
Preferred name for ba	adge (if different than above)	
Phone Number		
E-mail address		
Member # 2 (if applicable))	
Preferred name for ba	adge (if different than above)	
Phone number (if diffe	erent than Member 1)	
Member(s) Address		
Street Address		
Street Address, line 2		
	State	
How do you wish to receiv	ve meeting announcements and of	ther RPS correspondence?
(Check one) E-mail	l Postal mail	
*Would you like to make any changes to the (e.g. volunteer activities, interests, hobbies,	_	e previously submitted for the RPS database
No Yes If yes, an RPS	Board Member will contact you.	
*I/we are enclosing a check, payable to Reti	•	
(Check one) \$75.00, in	dividual\$125.00, 2 pe	ersons, same address

Mail your check and this completed form to: Retired Professionals Society, P.O. Box 662, Pittsford, NY 14534-0662