

**RETIRED FIRE & POLICE ASSOCIATION OF SAN DIEGO
MEMBERSHIP APPLICATION**

Instructions: Complete the following information; then sign, date and send to:
 Jim Caster, RFPA – **FAX Toll Free: 866-838-2304**
 PO Box 2679 – Ramona, CA 92065

First: -- Initial: -- Last Name:	Today's Date:
Spouse:	Date Retired:
Street Address:	Agency: <input type="checkbox"/> Fire <input type="checkbox"/> Police
City:	Type: <input type="checkbox"/> I am in DROP, still working. <input type="checkbox"/> I have retired, no longer working.
State: Zip Code:	Social Security #: - -
Area Code: Phone Number:	Email Address:

Please check here if you can use the Association website, www.retiredfp.com, for your news and online roster. No newsletter or roster will be mailed to you. All information will be available on the site. This saves printing and mailing costs.

Annual Dues Are \$24.00
 Paid by Automatic Pension Check Deduction Only.

Payroll Deduction Authorization:

I, the undersigned retiree of the City of San Diego, having entered into an agreement with the payee: **Retired Fire and Police Association**, whereby payments becoming due thereunder are to be deducted from my pension due or to become due me as such retiree, do hereby authorize the City Auditor and Comptroller and the City Treasurer to deduct from my pension pay-check such sums as appear on the pension payroll to the credit of said payee and further authorize payment of such deducted sums to the said payee. This authorization applies to any increase or decrease in the amount due the above payee and is to continue in effect until cancelled by written notice served by the undersigned retiree, (or the retirement office upon notification of death), or payee, on the City Auditor and Comptroller.

Date: _____ Signature: _____

	Retired Fire & Police Association: \$2.00 monthly Deduction will become effective the first of the month following the date you signed above.	
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