



## IBEW Local 617 Retiree Club Application

Date.....

Date of Retirement.....

Birthday.....

Retiree Name.....

Address.....

City.....State.....Zip Code.....

Spouse/Partner Name.....

Spouse/Partner Birthday.....

Telephone Number (.....).....

E-Mail Address.....

Yearly Dues are \$12 for each person, payable from January through December.  
Spouse/Partners are encouraged to join and participate.

Make checks payable to: IBEW 617 Retiree's Club.

Mail to:

IBEW 617 Retiree Club  
c/o G. Moller  
1421 Overland drive  
San Mateo, CA 94403