



## Membership Application

**I want to join South Dakota Retired School Personnel.**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_ **Zip** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**Send the above information and \$15 (annual state dues) to:**

**SDRSP Treasurer**

**Pat Johnson**

**1226 E Kemp**

**Watertown, SD 57201**