

**CITY OF PHOENIX RETIREES ASSOCIATION (COPRA)
MEMBERSHIP APPLICATION**

**CITY OF PHOENIX RETIREES ASSOCIATION
Membership Application**

Name of Retiree (Please Print)

Name of Spouse

Mailing Address

Telephone Number

City

State

ZIP Code

Retirement Date

Please send COPRA Chronicle by email.

Email Address (Please Print)

**MEMBERSHIP DUES: \$10.00 ANNUALLY
(DUES SPECIAL: PAY \$40.00 FOR 4 YEARS, GET MEMBERSHIP FOR 5 YEARS)**

SEND CHECK PAYABLE TO "COPRA" TO:

**COPRA
% MARVIN ROELSE
10701 E. PERALTA CANYON DRIVE
GOLD CANYON, AZ 85118-5130**