

UNITED RETIRED GOVERNMENTAL EMPLOYEES LOCAL 1

**P.O. BOX 65
Flint, MI 48501
810-743-4631**

E-mail address: urgemembers@yahoo.com

Web Site: www.urgemembers.com

I hereby make application for membership in the United Retired Governmental Employees organization (U.R.G.E.):

Name _____ **Date of Birth** _____
(Please Print)

Widow/Widower of: _____
(Complete this area if you are a Surviving Spouse of a City/Hurley Employee)

Signature _____ **Date** _____
(Do Not Print)

Summer Address _____
City/State/Zip _____

Winter Address _____
City/State/Zip _____

E-Mail Address _____

Phone _____ **Cell Phone** _____

Retired From _____ **Date/Year of Retirement** _____

Job Title _____ **Dept/Division** _____

Bargaining Unit _____

DUES CHECK-OFF REQUEST

I HEREBY AUTHORIZE MERS (Municipal Employees Retirement System) to deduct \$6.00 each month from my pension check and to assign such amount to the United Retired Governmental Employees for payment of dues.

Name _____ **Date** _____

Signature _____

Address _____

City/State/Zip _____