



APPLICATION FOR ACTIVE RETIRED MEMBERSHIP IN OSSTF

1. The annual membership fee of \$50 is payable January 1st. The fee is waived until January 1st following enrolment.
2. Active Retired Members shall have all the rights and privileges of Voluntary Members and all rights prescribed in the ARM Council Constitution.
3. Please complete and return this form to OSSTF ARM, 60 Mobile Dr, Toronto, ON, M4A 2P3

I hereby apply for Active Retired Membership in O.S.S.T.F. in accordance with the above.
[Please Print]

Surname: _____ Name & Initials: _____

Home Address _____
(Street) (Apt #)

(City) (Province) (Postal Code)

Home Phone No. (____) _____

E-Mail: _____ Birth Date: _____
(DD/MM/YY)

SIN Number and/or OSSTF #: _____ Date of Retirement: _____
(DD/MM/YY)

Last Employing School Board _____

Name and Number of OSSTF District _____

I hereby authorize the Ontario Secondary School Teachers' Federation to provide and release only my name, home address, home telephone number(s), and e-mail address to the Active Retired Members (ARM), for the sole purpose of ARM being able to communicate with me about OSSTF and retirement matters it is involved in, and for no other purpose.

More specifically, my signature herein does not authorize ARM to provide my personal information to any other organization, business, or person, with whom it may be dealing, and my signature herein is only provided on the understanding that ARM will reserve and keep such personal information confidential to itself, and not circulate it in any matter whatsoever external to ARM.

Signed: _____ Dated: _____