

Ventura County Community College District Retirees' Association
P. O. Box 6216
Ventura, CA 93006-6216

Rene G. Rodriguez, President
Harry Culotta, Immediate Past-President, Newsletter Editor
Bill Robinson, Vice-President
Marie Soo Hoo, Secretary
Pat Gage, Treasurer
For more information visit: www.vcccdra.org

Gary Johnson, Chair, Benefits Committee
Larry Manson, Chair, Educational Issues Committee
Joy Kobayashi, Chair, Membership Committee

e-mail: vcccdra@gmail.com

Application for Membership

Date: _____

Please accept my membership in the VCCCD Retirees' Association at _____ \$10 annually or _____ \$100 lifetime. My check in the amount of \$_____ is enclosed (*please make checks out to the VCCCD Retirees' Association and mail to VCCCDRA, P. O. Box 6216, Ventura, CA 93006-6216, and enclose with this application*).

First Name: _____ Middle Initial _____ Last Name _____

Home Address: _____

City _____ State _____ Zip _____

Home Phone: (____) _____ Cell Phone: (____) _____

E-mail Address: _____

Please fill out the following survey to help us gain basic information about our retirees. Thank you!

Month/Year Hired Full-Time: _____ Month/Year Retired: _____ Years of Service: _____

Retired From (MC/OC/VC/DO): _____ Position Title at Retirement: _____

Employee Category (Faculty, Classified, Supervisor, Manager): _____

Currently Receiving District Paid Health Benefits? Yes _____ No _____

Currently Receiving Medicare Part A? Yes _____ No _____ Part B? Yes _____ No _____

If not currently receiving Medicare, will you be eligible later? Yes _____ No _____

If yes, year that you will be eligible: _____