RETIRED EMPLOYEES OF SAN DIEGO COUNTY, INC. (RESDC)

MEMBERSHIP APPLICATION

☐ **Associate Membership**
I am an active or deferred San Diego County or Superior Court employee, or a non-County-affiliated spouse of a current RESDC member. I have enclosed a check made out to RESDC for $60 annual Associate Membership.

☐ **Sign up for e-delivery of your documents & monthly newsletter.**

NAME*: _____ _____ _____
First *MI* *Last*

LAST 4 OF SOC. SEC. #**: _____

EMAIL: _____

PHONE*: _____ ☐ *Cell* ☐ *Home* ☐ *Work* ☐ *Other*

ADDRESS*: _____

CITY*: _____ STATE*: ___ ZIP*: _____

DEPARTMENT: _____ RETIRED DATE: _____

SIGNATURE*: _____ SDCERA-3350

*Required
**Required for deduction of dues

Please fill out form, sign, and mail to:
RESDC
3760 Convoy St., Suite 118
San Diego, CA 92111

For questions, please contact the RESDC office at (619) 688-9229,
toll-free at (866) 688-9229, or by email at resdc@resdc.net.
Our office hours are Monday - Friday, 9 am - 2pm.