



## APPLICATION FOR ASSOCIATE MEMBERSHIP

I am an active or deferred San Diego County employee, or a non-County-affiliated spouse of a current RESDC member, and I have enclosed a check made out to RESDC for \$12 annual Associate Membership. I understand that Associate Membership does not entitle me to vote or hold office in RESDC, but that all other membership benefits apply. I understand that when I retire, I must notify RESDC and switch to Retired Employee Membership.

NAME\*: \_\_\_\_\_  
*First* *MI* *Last*

EMAIL: \_\_\_\_\_

PHONE\*: (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
 Cell  Home  Work  Other  Cell  Home  Work  Other

ADDRESS\*: \_\_\_\_\_

CITY\*: \_\_\_\_\_ STATE\*: \_\_\_\_ ZIP\*: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

SIGNATURE\*: \_\_\_\_\_

\*Required

**Please print and fill out form. Include a check for \$12.00 payable to RESDC for your yearly membership dues, and mail to:**

**RESDC  
8825 Aero Drive, Suite 205  
San Diego, CA 92123**

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