## DNR, DEQ, AND EGLE RETIREES ASSOCIATION MEMBER INFORMATION UPDATE

Please complete this form and mail to:

RETIREE:	DNR DEQ EGLE
SPOUSE/PARTNER:	
Main or Summer Address (Circle one)	Winter or summer address (Circle one)
Dates	Dates
Street	_ Street
City	_ City
State/Zip	State/Zip
Phone	_ Phone
*Email	_ Retiree
*Email *Email YOUR NEWS FOR NEWSLETTER	
*Email YOUR NEWS FOR NEWSLETTER	_ Spouse or other
*Email YOUR NEWS FOR NEWSLETTER	_ Spouse or other
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