

ROBS MEMBERSHIP FORM

2025 - 2026

Please Print

Last Name _____ First Name _____

Address 1 _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____

Email _____

Address 2 _____

City _____ State _____ Zip Code _____

Building _____ Department _____

Retirement Year _____

*Checks should be made out to **ROBS** with "Dues" written on the memo line and sent to:

Carmen Roldan - 49 Linda Lane - North Babylon, NY 11703

Dues are \$30 and the deadline is October 31st.

**Dues are complimentary for those members over the age of 80 ... please
be kind enough to fill out this form and send it in even if you do not have to pay dues.**

Please do not staple your check to this form.

Thank you for your prompt return.