

The information below will be printed in the 2024 directory if postmarked by 12/31/2023.
WRITE ANY CHANGES OR CORRECTIONS ON THIS FORM AND RETURN.

Do You Want a *Directory*? ☐ Yes ☐ No

Please provide your Email address: _____ Member # _____

Name _____

Address _____



Lifetime Member Information Confirmation

Please return postmarked by
December 31, 2023 to:

MSRA Membership
PO Box 431
Hastings, MN 55033

**This is not an invoice.
Please complete and return.**

Return Entire Form! • Do Not Cut! • Return Entire Form! • Do Not Cut! • Return Entire Form! • Do Not Cut! • Return Entire Form!