

Retirement Education Event Request

TRTA will promote events and provide resources for the presenters and attendees.
Complete and return as soon as the date for your event is confirmed.

Event Contact

Name _____

Phone _____ Email _____

Chapter _____ District _____

Calendar Event Details

Date of Event _____ Time _____

Building Name/Room _____

Address _____

City _____ State _____ Zip _____

Sponsored by: Chapter District With TRS Without TRS

Email for RSVPs to event: _____

Submit to TRTA

Email: info@trta.org

To save and submit the request form, you must click on "Open in Acrobat."