## R E A P Application Form (All fields are required entries) Mail to:

## Retired Educators and Professionals 700 North Cedar Road, Jenkintown PA 19046 info@reaptalk.org

Name	
Address	
77 - 11	
Email	
Phone(s)	
Profession	
Profession	
Affiliations & Volunteer Organizations	
Fields of Interest & Hobbies	
How did you been shout DEAD	
How did you hear about REAP	
Signature:	Date:

I understand that if I am accepted as a member of REAP, I am to deliver a talk every 18-24 months after my first year of membership. Each talk that I present will be approximately seventy-five minutes long and will have been personally researched by me in an area of interest other than my expertise. Topics to be excluded are travelogues, book reviews, religious and political commentary.