

**REGISTRATION FORM
MEDTRONIC VSP RETIREE GROUP**

To register as a VSP member, please complete this form and mail it to the Secretary below. Alternatively, email or phone this information to the Secretary.

Date: _____

Print Name: _____

Date of Medtronic Retirement: _____

Employee #: _____

Email Address _____

Telephone #: _____

Street Address: _____

City/State/Zip: _____

Significant Other Name: _____

Current Employer (if applicable) _____

Mail To: Carol Baumgartner - *Secretary, Medtronic VSP Retiree Group*
1900 Rush Lake Trail, #422
New Brighton, MN 55112

Email address: *carol.baumgartner01@gmail.com*

Phone: 651-464-6049