BASIN ELECTRIC POWER COOPERATIVE
RETIREE DIRECTORY CONSENT FORM

I, _____, give my permission for my name, email address, phone number and address listed below to be published in the Basin Electric Power Cooperative Retiree directory. I am aware that all retired employees of Basin Electric will have access to this directory. Further, I am also aware that Basin Electric employees will have access to the directory for business use only. This directory will serve to keep Basin Electric retired employees connected.

Signature: Date:

Print Name:

Phone number for Directory:

Email Address:

Permanent Address:

Winter/Seasonal Mailing Address:

Birthdate (optional):

Spouse's Name:

Facility Worked At: