ANNUAL MEMBERSHIP INFORMATION

Dues for Year 2016 Please Check	c: New Member Renewal
\$20.00 Single \$30.00 Couple Honor	ary (If 80 yrs+ No Fee Needed)
Name:	Birthday MM/DD/YR//
Spouse: If a couple please include your anniversary Physical Address:	Birthday MM/DD/YR// Anniversary MM/DD/YR//
Mailing Address:	
City: State: _	Zip:
Home Phone: Cell:	Spouse Cell:
E-Mail(s) Check if willing to read our SS Newsletter on- Our Special Interests/Hobbies/Talents: I/WE CAN VOLUNTEER TO: Bake Make to Assist with food boxes Work on a Committee Set-up/Serve/Clean-up at Monthly Luncheons & S I am interested in: List what you would participat	line and receive reminders by email. telephone calls Work in Gift Shop be Be a Cook (contact me w/info.) pecial Functions
☐ (Member #1) I grant permission for my photograssanta's Senior Center Corporation, Inc. ☐ (Member #2) I grant permission for my photograssanta's Senior Center Corporation, Inc. Signature Member #1:	aph to be used in publicity or brochures related to
Signature Member #2:	
Rec'd by Check#/Cash Receipt Writt SS Annual Membership Information 8-28-13	en Card Issued Processed