AUBURN SENIOR CENTER

MEMBERSHIP APPLICATION

Membership Type: ☐ Single $25.00/yr ☐ Joint $40.00/yr ☐ Over 90 Free ☐ Paid Lifetime

Member #1

Name_____Date of Birth _____
First Last

Email Address_____ Phone_____

Member #2

Name_____Date of Birth _____
First Last

Email Address_____ Phone_____

Address_____
Street City State Zip

Emergency Contact _____
Name Phone

Are you interested in Volunteering?

☐ Yes ☐ No

What are your interests (e.g., Travel, Games, Art)?

_____

_____

_____

What is your level of experience with a computer?

☐ Beginner or None
☐ Novice
☐ Intermediate
☐ Advanced
☐ Expert

How did you hear about the Center?

☐ Friend or Family Member
☐ Internet Search
☐ Social Media
☐ Sign or Flyer
☐ Other

FOR OFFICE USE ONLY

Date:_____ Amount Paid: $_____

Check # or "Cash" _____

Receipt # _____

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