



MEMBERSHIP APPLICATION

Membership Type: Single \$25.00/yr Joint \$40.00/yr Over 90 Free

Member #1

Name _____ Date of Birth _____
First Last

Email Address _____ Phone _____

Address _____
Street City State Zip

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

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FOR OFFICE USE ONLY

Date: _____ Amount Paid: \$ _____

Check # or "Cash" _____

Receipt # _____