



Thank you for your interest in becoming a participating member of our Senior Center. The annual membership fee is **\$50.00**. We are required to ask the questions below by our funding sources, but if you prefer not to answer any of the following questions, leave blank. **ALL personal information is confidential.**

Name: _____

Address: _____

City & ZIP _____

Phone: _____ Cell: _____

E-MAIL: _____

EMERGENCY CONTACTS:

Friend/relative

Name: _____ Phone: _____

Doctor

Name: _____ Phone: _____

HEALTH STATUS (*circle one*) Excellent Good Fair Poor

Special Needs: _____

Retired? _____ Present/previous occupation _____

Please list your special interests: _____

How Can The Senior Center Assist You? _____

How Can You Help The Center?

It takes 100s of volunteers to run the center. We'd love for you to be a part of the volunteer team. Please indicate if you would like to participate by volunteering in any of these areas:

- | | |
|---|---|
| <input type="checkbox"/> Meals on Wheels Driver | <input type="checkbox"/> Janitorial/Handyman/Trades |
| <input type="checkbox"/> Kitchen Assistant /Dishwasher | <input type="checkbox"/> Computer Class Assistant |
| <input type="checkbox"/> Café/Bar: Food Assistant | <input type="checkbox"/> Bingo crew (training provided) |
| <input type="checkbox"/> Outreach Visitor: Senior Connections | <input type="checkbox"/> Class Teacher/Facilitator |
| <input type="checkbox"/> Fund Raising Projects/Marketing Projects | <input type="checkbox"/> Front Desk Receptionist |
| <input type="checkbox"/> Stop 'n Shop: Clerk/Cashier/Pricer | <input type="checkbox"/> Pick Ups & Delivery |
| | <input type="checkbox"/> Other _____ |

Demographics for our Grants:

Date of birth _____

Gender: ___F ___M

Household size _____

No. children under 18 in home _____

What race do you identify with most?

Are you a veteran? Y N

Are you disabled? Y N

Are you an immigrant? Y N

Have limited English? Y N

Are you homeless? Y N

Income: Very Low _____ Low _____
Moderate _____ Above Moderate _____

Photographs are taken at the Senior Center at special events. May the Center use any photographs for publicity purposes? Yes ___ No ___ Signature _____