



# Senior Community Center Membership Form

Membership Year:

Name:

Address:

Home Phone:

Cell Phone:

E-Mail Address:

Please Register me for Springfield Township e-news:

Do you give authorization for the Senior Center Director to give your contact information to another Senior Center member? YES:  NO:

Are you a resident of Springfield Township? YES:  NO:

Date of Birth:

Emergency Contact Person:

Relation:

Emergency Contact Phone:

Any health issues or concerns we should be aware of?

It is your responsibility to inform the Center of any changes to the information above.

I have received, understand and agree to the Springfield Township Senior by-laws. I understand and agree to absolve Springfield Township of all blame for injury, misadventure, harm, loss, or inconvenience suffered as a result of taking part in any activity sponsored by, associated with or related to the Springfield Township Senior Community Center.

Signature

Date

## Membership Fees

Resident Fee \$20 \_\_\_\_\_  
Nonresident Fee \$25 \_\_\_\_\_

Paid By: CASH:  CHECK #  CREDIT CARD   
*\*3% service charge for credit card payments*

Lifetime Membership Ages 55-74 (Resident) \$150 \_\_\_\_\_  
Lifetime Membership Ages 55-74 (Non-Resident) \$200 \_\_\_\_\_

Lifetime Membership Ages 75 Over (Resident) \$100 \_\_\_\_\_  
Lifetime Membership Ages 75 Over (Non-Resident) \$150 \_\_\_\_\_