

Orcas Senior Center

MEMBERSHIP FORM

Please Choose One:

STANDARD Membership

\$30 (single)

\$50 (couple)

PRIME Membership

\$125 (single)

\$200 (couple)

GOLD PREMIER Membership

\$300 (single)

\$500 (couple)

** Complete list of membership benefits on back of this form or at www.orcasseniors.org. **

** Limited scholarships available for those in need. Contact (360) 376-7929 or admin@orcasseniors.org. **

FIRST MEMBER

First Name: _____

Last Name: _____

Phone Number: _____

Email: _____

YES! I am interested in VOLUNTEERING.

SECOND MEMBER

First Name: _____

Last Name: _____

Phone Number: _____

Email: _____

YES! I am interested in VOLUNTEERING.

Mailing Address: _____ City: _____ State: _____ Zip: _____

How would you like to receive our NEWSLETTER? Mail Email Both Email and Mail

I/We also wish to make a donation to Orcas Senior Center:

\$25 \$50 \$100 \$250 \$500 Other: _____

Thank you for your contribution to our nonprofit! All gifts are tax deductible.

MAIL to: Orcas Senior Center, PO Box 1653, Eastsound, WA 98245

***** FOR OFFICE USE ONLY *****

Membership Amount: \$ _____ Donation Amount: \$ _____ Payment: CC Cash Check # _____

Date Received: _____ Received by: _____