

Anchor Point Senior Center Incorporated

P.O. Box 438
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Anchor Point, AK 99556-0438

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****Membership Form****

Information is used to help document the use of our services and help us with future funding, planning activities and programs.

PLEASE PRINT

Please fill one form out for EACH person

Name: _____ **Spouse:** _____
(Last / First / Middle)

Married: Yes ___ No ___ **Sex:** M ___ F ___ **Children At Home?** _____

Veteran: Yes ___ No ___

Mailing Address: _____

City-State-Zip: _____

Location of Residence: _____

Birth Date: _____ **Anniversary:** _____
(Month / Day / Year) (Month / Day / Year)

Phone #: _____ **E-mail:** _____

Would you like to receive your newsletter by email? Yes _____ **No** _____

Hobbies: _____

Other Interests: _____

IF UNDER 55: Yes _____ No _____

Annual Membership Dues: \$30.00 (July 1st - June 30th)

Lifetime Membership: \$250.00 (Per Member)

Full time Resident: Yes ___ No ___

Winter Address: _____

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(Staff Use Only)

<i>Date Paid</i>	<i>Cash/Check</i>	<i>Membership Year</i>	<i>Date Paid</i>	<i>Cash/Check</i>	<i>Membership Year</i>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____