

Apple Valley Seniors
Membership Application 7/1/16 to 6/30/17
Location – 14601 Hayes Road in Apple Valley
(MAILING ADDRESS – 7100 W. 147TH STREET, APPLE VALLEY, MN 55124)

Last name _____

First name(s) Member 1 _____ Member 2 _____

Address _____ Apartment # _____

City _____ State _____ Zip code _____

Telephone (____) _____

Send Gazette by E-mail to _____ or U.S. Mail _____

Interests: _____

Would you like to be contacted about volunteer opportunities (serving on committees etc.?) _____

Occupation(s) before retirement 1. _____ 2. _____

Membership fee from 7/1/16 – 6/30/17 \$15 per person ____ member(s) X \$15 = ____

New Member

Check # _____

Renewal of Membership

Cash

Credit Card

Make Check Payable To: APPLE VALLEY SENIORS

The Membership Directory will be printed in August; the deadline for inclusion is July 15, 2016.

If you **DO NOT** want your name or address listed in the directory please check the appropriate box below.

Address

Telephone Number

Signature _____

Date _____

*****ATTENTION SNOWBIRDS – BULK MAIL IS NOT FORWARDED*****

If you have a different winter or summer address and want to continue receiving The Gazette please include your e-mail address so it can be sent electronically. If you have any question regarding the forwarding of The Gazette, check with the office.

E-Mail Address (please print) _____

DATES TO SEND TO THIS ADDRESS: _____ to _____
(beginning date) (ending date)

Please complete and bring this form to the Apple Valley Senior Center or mail to:

APPLE VALLEY SENIORS
7100 W. 147th Street, Apple Valley, MN 55124

OFFICE USE ONLY

Entered in Computer _____ Entered in e-mail list _____

Letter Sent _____ Membership Card _____ Emergency Card _____

updated 4/16