

McKEE HOUSE SENIORS SOCIETY MEMBERSHIP APPLICATION

**THE ANNUAL MEMBERSHIP FEE IS \$30.00
FROM JANUARY 1ST TO DECEMBER 31ST**

PLEASE COMPLETE THE FOLLOWING:

NEW RENEWAL

LAST NAME: _____ FIRST NAME _____

MR. MRS. MS.

Email: _____

I would like to receive the monthly Kee Notes via e-mail. YES NO

Street Address: _____ Apt. _____

City: _____ Postal Code: _____

Phone:_(____)_____ Fax:_(____)_____

AGE RANGE

50-54 55-59 60-64 65-69 70-74 75-79
 80-84 85-89 90-94 95-100 100 plus

IMPORTANT!!!

IN CASE OF EMERGENCY, PLEASE NOTIFY:

NAME: _____ PHONE: _____

RELATIONSHIP: _____

**If you would like to volunteer, please complete a
separate Volunteer Application at the front desk.
Thank you.**

APPLICANT'S SIGNATURE: _____

DATE: _____
 Year Month Day

Please Fill Out Waiver Form