

OREGON SENIOR CENTER

Membership Application through 12/31/2025

Annual membership begins on January 1 and expires on December 31. New members are welcome at any time. Please check appropriate membership category.

BOOSTER Membership (60 & over, with voting rights): \$25/Individual \$35/couple
NON-RESIDENT or SUPPORTING Membership (under 60, without voting rights): \$35/Individual \$50/couple

-- OR --

We welcome special supporting contributions. We will acknowledge these general contributions by placing the donor's name on display in the Center during the membership year.

\$50.00 Bronze-Level Support Member \$250.00 Diamond-Level Support Member
\$75.00 Silver-Level Support Member \$500.00 Platinum-Level Support Member
\$150.00 Gold-Level Support Member

INDIVIDUAL MEMBERSHIP OR PERSON 1

Date Male Female
Last Name First Name
Last 4 Digits of SS Birthdate
Address
City State Zip
Home Phone Cell Phone

PERSON 2 (Spouse if applicable)

Date Male Female
Last Name First Name
Last 4 Digits of SS Birthdate

EMERGENCY CONTACT INFORMATION (MUST BE COMPLETED)

Last Name First Name
Home Phone Cell Phone
Last Name First Name
Home Phone Cell Phone
Primary Physician Phone
White Hispanic African-American Native American Asian

Please answer these questions. Your answers will help your Senior Center obtain grants and financial Contributions to grow and help curb the cost of dues.

Rural: Yes No Number of Persons in Household Monthly Income
Do you consider yourself at or below poverty level? Yes No

# PHOTO RELEASE FORM

I hereby grant permission to *The Oregon Senior Center* to use photographs and/or video of me taken in publications, news releases, online, and in other communications related to the mission of *The Oregon Senior Center*.

Name \_\_\_\_\_

Address \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (day) \_\_\_\_\_ (evening) \_\_\_\_\_

Email Address (optional) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Signature of Adult, or Guardian of Children under age 18)

**Thank you!**