

For Office Use:

Data Base Card Pd. M'ship #

Please complete this side #

SWANSEA AREA SENIORS ASSOCIATION (S.A.S.A.)
Membership Application and Renewal form. *Please print.*

S.A.S.A. ANNUAL FEE

SINGLE \$12.00 DOUBLE \$20.00

Date: .../.../..... **Name:**

Amount paid: \$.....

Apt # **Street Address:**

Please check one box

Postal code: **Tel:**

RENEWAL
NEW MEMBER

Email:

For Office Use

Emergency Tel:

D. O.B. day month year

Name:

Classes/Activities: **Could you volunteer?** Yes

Class/Activity: