



Membership Application

DATE: _____

CONTACT INFORMATION

NAME: _____

DOB: _____

NAME: _____

DOB: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHYSICAL ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL ADDRESS: _____

EMAIL ADDRESS: _____

EMERGENCY CONTACT: _____ PHONE: _____

NEWSLETTER: (please circle) E-MAIL SNAIL MAIL VIEW ON WEBSITE

How did you hear about NSC: Friend/Family: ____ Word of Mouth: ____ Internet: ____ Other: _____

PROGRAMMING & DEMOGRAPHICS

Personal and demographic information is used to apply for grants that improve the well-being of our senior membership. All information is kept confidential and will not be released to any individual or business without a signed Release of Information.

What race do you identify with? Caucasian ____ AK Native/American Indian ____ African American ____
Native Hawaiian/Pacific Islander ____ Hispanic ____ Non- Hispanic ____

Are you a Veteran? YES ____ NO ____

Do you consider yourself to be a person with a disability? YES ____ NO ____

Do you have transportation, or do you need transportation services? YES ____ NO ____

Are you caring for a family member or friend? YES ____ NO ____

Do you consider your income level to be: Low = \$52,200↓: ____ Moderate = \$156,600↓: ____
Above Moderate \$156,600↑: ____



Providing services that enhance the personal well-being and enjoyment of the life of all persons



MEMBERSHIP

ANNUAL MEMBERSHIP \$25.00: ___ Membership runs January 1st - December 31st of each year.

LIFETIME MEMBERSHIP \$125.00: ___ **LIFETIME COUPLE MEMBERSHIP \$200.00:** ___

Would you like to Sponsor another senior? YES ___ **NO** ___

ANNUAL BUSINESS MEMBERSHIP \$150.00 ___

Help purchase a membership for a senior in need. Amount Donated: \$ _____

Benefits	Annual Membership	Lifetime Membership	Business Membership
Attend Annual Meeting & Vote	X	X	No Voting
Receive Monthly Newsletter	X	X	X
FREE Notary Services	X	X	X
FREE Faxing, Photocopies	X	X	
FREE Wifi	X	X	
FREE Entry to Most NSC Activities (Excluding Annual Fundraiser)	X	X	
1 FREE Small Rental Space (Excluding Main Dining Area)	X	X	X
FREE Birthday Lunch	X	X	
FREE Advertisement in Monthly Newsletter	X	X	X
20% Discount on Rental or Catering			X
Discount at participating local businesses: <ul style="list-style-type: none"> • Olde Goat Café 10% off drink • Nikiski Hardware & Supply 5% off purchase (can be combined w/ VA discount) • M&M Market 10% off purchase (excludes tobacco) • KIVI Creations 10% off purchase • Rubys Café 20% off purchase • Nikiski Fire Dept. FREE BP Check 	X	X	

Office Use Only:

Application Received by: _____

Total Amount: \$ _____ *Check #* _____ *Cash* _____

Name Added to Newsletter List: Mail _____ *E-Mail* _____

Name Added to Membership Spreadsheet & Form Filed in Members Binder: _____

Additional Notes: