

SAGEBRUSH SENIOR CENTER MEMBERSHIP APPLICATION

PO BOX 1657
MATTAWA, WA 99349

Renewal: New: Dues: \$12.50 per person

Date: _____

Email:

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Phone: _____ Anniversary: _____

Street Address: _____

Mailing Address: _____

Winter Address: _____

We would like to help with: (Please check as many areas as you are interested in)

Kitchen (everyday maintenance, pop machine, trash removal)

Food & Catering (Potluck hosts, cooking for golf dinners, men's & ladies breakfasts & special fund raisers)

Community service & events (scholarships)

Repairs & Maintenance (interior, exterior, landscaping)

Sunshine (memorials & sunshine)

Newsletter (printing & collating/mailing etc)

Regular Monthly Fund Raisers (Help at Bingo-ticket sales, kitchen, floor, callers)

Other Fund Raisers (silent/live auctions, raffle quilt etc)

Facilities & Service (library, storage, flag, permits, sign, table/chair rentals)

I will help wherever I am needed

Office Use Only:

Date paid:

Check #:

Cash:

Cards Sent: