Senior Center
January-December 2017
Membership Renewal Form

Membership Card photos will only be taken in person. Please visit the Senior Center front desk to acquire your card. Print and complete the following form and sign upon completion.
Completed forms may be dropped off or mailed to:

Costa Mesa Senior Center
695 W. 19th Street, Costa Mesa, CA 92627

Name of person(s) in HOUSEHOLD registering for membership:

(1) ☐ ***Mr.*** ☐ ***Mrs.*** ☐ ***Ms.*** ☐ ***Other:*** _____

Last Name: _____ ***First Name:*** _____

Age: ☐ Under 62 ☐ 62+ ***Sex:*** ☐ Male ☐ Female

Please select ONE: Hispanic/Latino ☐ Yes ☐ No

Please select ONE: ☐ White ☐ African American/Black ☐ Pacific Islander
☐ Asian ☐ Native American ☐ Other

By signing below, you acknowledge the following statement:

"I certify that the above information is true and correct and that documentation of this information will be provided, if requested."

Signature: _____ ***Date:*** _____

Name of person(s) in HOUSEHOLD registering for membership:

(2) ☐ ***Mr.*** ☐ ***Mrs.*** ☐ ***Ms.*** ☐ ***Other:*** _____

Last Name: _____ ***First Name:*** _____

Age: ☐ Under 62 ☐ 62+ ***Sex:*** ☐ Male ☐ Female

Please select ONE: Hispanic/Latino ☐ Yes ☐ No

Please select ONE: ☐ White ☐ African American/Black ☐ Pacific Islander
☐ Asian ☐ Native American ☐ Other

By signing below, you acknowledge the following statement:

"I certify that the above information is true and correct and that documentation of this information will be provided, if requested."

Signature: _____ ***Date:*** _____

*****PLEASE SEE REVERSE SIDE OF APPLICATION *****

Address: _____

_____

City: _____ ***Zip:*** _____

Home Phone Number: ( ) _____-_____

Cell Phone Number: ( ) _____-_____

Main Contact E-mail: _____

What is the best time to reach you? _____

How would you like to receive your newsletter? (Please select ONE)

- ☐ **U.S. Mail**
- ☐ **Save the stamp! I can pick-up my copy at the Costa Mesa Senior Center.**
- ☐ **Save the earth! You can email it to me at:**
  _____@_____.com
- ☐ **Save your time. I can view the newsletter online at:**
  www.costamesaca.gov/seniorcenter

If you would like to update your information or be removed from our membership list at any time, call or email the Costa Mesa Senior Center at **cmseniorcenter@costamesaca.gov** or **(714) 327-7550**.

Thank you for taking the time to complete this form!

For office use only:

Membership Card Issued:	***Household Person (1)***	***Household Person (2)***
	Date: _____	***Date:*** _____
	Staff Initials: _____	***Staff Initials:*** _____

Notes: _____

_____