PLEASE PRINT CLEARLY!!!

CHINO HILLS 55+CLUB

A Seniors Citizen Club – Established 2013

ANNUAL MEMBERSHIP APPLICATION

Name: _____ **Badge Name**_____
First Last (if different from "First")

Address:_____ **Gender: M___F___**
Street Address City ZIP

Date of Birth: _____ **Anniversary (if applicable):** _____

Email: _____ **Cell#**_____

Former Occupation: _____ **U.S. Veteran?** _____ **Branch**_____

Emergency Contact:_____ **Relationship**_____
Name **Phone#** _____

How did you hear about us? _____

SEE ATTACHMENT FOR VOLUNTEER OPPORTUNITIES

In submitting this application and membership fee, I agree to adhere to the Club rules, regulations, and By-Laws thereby supporting the Mission and Goals of the Chino Hills Club.

Signature_____**Date:**_____

ANNUAL MEMBERSHIP DUES
Fiscal Year July 1 - June 30

Annual Membership July 1 – June 30	**$15.00**	**$**_____
Name Badge ***(required to be worn at all meetings)***	**$12.00**	**$**_____
	TOTAL	**$**_____

Make check payable to: **Chino Hills 55+ Club** **Mail to: P.O. Box 2364 – Chino Hills, CA 91709-0079**

PAID

Amount Paid $_____ **By Check #**_____ **By Cash** _____ **By Zelle:** _____

Received by (Name)_____**Date:**_____

Chino Hills 55+ Club is incorporated as a 501(c)(3) nonprofit, tax-exempt Public Benefit Charity

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