



CHINO HILLS 55+ CLUB
 (A Senior Citizen Club • Established 2013)
ANNUAL MEMBERSHIP APPLICATION

Name _____ Badge Name _____
First Last (only if different from First name)

Address _____ Gender: Male ___ Female ___
Number Street

_____ Home phone (____) _____
City Zip

Date of Birth _____ Cell phone (____) _____
MM / DD / YYYY

E-mail _____
(Please PRINT clearly)

Former Occupation _____
(or current occupation, if still working)

**** Please attach an Interests sheet**

Served in the U.S. Armed Forces? No Yes Which branch? _____

Emergency Contact _____ (____) _____
Name Phone Relationship

Associate Membership available for Under-55 Spouse or significant other. - Request application

Fiscal year Membership 7/1 - 6/30\$12.00
 Additional preceding months _____ @ \$1.00 = \$_____
 Name Badge (required for a new member) \$6.00 \$_____
TOTAL \$_____

All memberships include the upcoming fiscal year (7/1 - 6/30).
 Members joining in Jul - Dec, pay \$12 membership thru next June.
 Those joining in January - June, pay the \$12, plus \$1 per month for the extra months preceding July.

Please make check payable to: **Chino Hills 55+ Club** (Mail to: P.O. BOX 2364 • CHINO HILLS 91709-0079)

*In submitting this application and membership fee, I agree to adhere to the Club rules and regulations, thereby supporting the Mission and Goals of the **Chino Hills 55+ Club**.
 Furthermore, I agree to wear my Club name badge at Club meetings and all Club functions.*

Signature _____ Date _____

PAID \$ _____ by Check # _____ or with Cash
 Received by _____ Date _____ Receipt # _____