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PLEASE PRINT CLEARLY

Name: _____

Address: _____

Date of Birth: _____

Last 4 digits of your SS#: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Emergency Contact: _____

Emergency Contact Ph.#: _____

Male Female Household Size _____

Marital Status: Married Divorced Single Separated
 Widowed

Ethnicity: Hispanic or Latino Not Hispanic or Latino

Estimated Annual Income: \$ _____

Abused/Neglected/Exploited Yes No

Disabled: Yes No Veteran: Yes No

Female Head of Household: Yes No

Frail: Yes No Home bound: Yes No

Medicare Eligible: Yes No

Receiving Social Security: Yes No

Are you a veteran or veteran's spouse? Yes No

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\$10.00 Patron Subscription:

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- Recognition in the newsletter

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- All Patron benefits.
- Center for Active Living T-shirt.

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- All Patron benefits (no t-shirt).
- Discounted copy services (5¢ each).

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- Free use of in house computers.
- Discounted Notary Services.

(\$1.00 per item, when Notary is available)

- One complimentary ticket to one of ACCOA's parties.

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- Discounted fax services available.
- Free notary service (when available).
- One complimentary tickets to two of ACCOA's parties.

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- Free Coffee for yourself.
- One complimentary tickets to three of ACCOA's parties.
- ACCOA Center for Active Living T-shirt.

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