

**McKEE HOUSE SENIORS SOCIETY**  
**MEMBERSHIP APPLICATION**                      Membership No. \_\_\_\_\_

**ANNUAL MEMBERSHIP**  
**FROM JANUARY 1<sup>ST</sup> TO DECEMBER 31<sup>ST</sup>**  
**PLEASE COMPLETE THE FOLLOWING:**

NEW                       RENEWAL

LAST NAME: \_\_\_\_\_ FIRST NAME \_\_\_\_\_

MR.                       MRS.                       MS.

Email: \_\_\_\_\_

Provision of my email constitutes agreement to receiving periodic emails from McKee concerning McKee business and news. I may unsubscribe at any time.

Phone:\_(\_\_\_\_)\_\_\_\_\_ Cell:\_(\_\_\_\_)\_\_\_\_\_

Street Address: \_\_\_\_\_

Apt. \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**AGE RANGE**

50-54     55-59     60-64     65-69     70-74     75-79  
 80-84     85-89     90-94     95-100     100 plus

**IMPORTANT!!:**

IN CASE OF EMERGENCY, PLEASE NOTIFY:

NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

APPLICANT'S  
SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_  
          Year        Month        Day

**If you would like to volunteer, please complete a separate Volunteer Application at the Front Desk. Thank you.**

**Please Fill Out Waiver Form**

**OFFICE USE ONLY**

**2022**  
**Invoice No.**

**2023**  
**Invoice No.**

**2024**  
**Invoice No.**

**2025**  
**Invoice No.**

**2026**  
**Invoice No.**

**2027**  
**Invoice No.**

**2028**  
**Invoice No.**

**2029**  
**Invoice No.**

**2030**  
**Invoice No.**