

APPLICATION FOR MEMBERSHIP (web version 11/21)

SENIOR CITIZENS OF BIG BEAR VALLEY

\$10 per person (age 50+) Regular (mark box)

\$10 per person (under 50) Associate (mark box)

Payable to: SCOBBV

Mail: SCOBBV, PO Box 6644, Big Bear Lake, CA 92315

NAME(s) _____ PHONE _____

PHYSICAL ADDRESS _____ CITY _____

ZIP _____

MAILING ADDRESS _____ CITY _____

ZIP _____

HIS BIRTHDAY: _____ Month _____ Day HER BIRTHDAY: _____ Month _____ Day

I am interested volunteering for: Thrift Store _____ Senior Center _____ Other _____

EMERGENCY NAME _____ PHONE _____

DATE JOINED _____ FAVORITE CHARITY _____

OFFICE USE ONLY			
INITIAL	RECEIPT#	INITIAL	RECEIPT#
_____	2021	_____	2024
_____	2022	_____	2025
_____	2023	_____	2026

To SCOBBV Board of Directors (optional):

NONE of my PERSONAL OR PRIVATE DATA (other than that required by a governmental or other "official" entity) IS TO BE RELEASED OR CIRCULATED WITHOUT MY EXPRESSED, "WRITTEN CONSENT".

DATE, PRINT AND SIGN YOUR NAME TO THIS STATEMENT