

# Membership Application

New  Renewal

Name (please print)

Title: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Last: \_\_\_\_\_

Address: \_\_\_\_\_ Apt. # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Home: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_

Fax: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Birth Date \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Sex: M / F Occupation: \_\_\_\_\_ Retired: Y / N

Regular Membership	one year	\$50	\$ _____
	two year	\$90	\$ _____
Lifetime Membership		\$500	\$ _____
Additional Contribution			\$ _____
Total Enclosed (Tax Deductible)			\$ _____

Visa MC Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Check if you consent to automatic annual membership renewal by credit card. You may cancel auto renewal at any time.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Fifty-Plus Lifelong Fitness**  
**658 Bair Island Road, Suite 200**  
**Redwood City, CA 94062**

**www.50plus.org**

**(650) 361-8282**

Return Service Requested