



UPPER KITTITAS COUNTY SENIOR CENTER
P. O. Box 877 (719 E. Third St.), Cle Elum, WA
98922 509-674-7530, info@ukcseniorcenter.org

Page 1 of 1
3/7/2025
www.ukcseniorcenter.org

MEMBERSHIP FORM

CIRCLE ONE: **BASIC \$25/year** **SUPPORTING \$50/year** **SUSTAINING \$100/year**
 LIFETIME \$250/one time **BUSINESS \$250/year**

Cost is per person. Choose based on your ability to pay, your participation in programs, and your choice of level of support of the Center.

DATE _____ (Expires in 1 year unless Lifetime)
NAME _____ BIRTHDAY _____
EMAIL ADDRESS _____ CELL PHONE _____
MAILING ADDRESS _____ CITY, STATE, ZIP _____

HOW WOULD YOU LIKE TO RECEIVE THE NEWSLETTER? CIRCLE ONE: MAIL EMAIL

HOW WOULD YOU LIKE TO VOLUNTEER? CIRCLE ONE OR MORE

Library	Garden and Grounds	Newsletter
Events setup/teardown	Event Monitor	Handy Work
Server (must get food worker card)	Flower Boxes (plant, water)	Sunshine Desk
Dishwasher (need food worker card)	BINGO (caller, cashier) <input type="checkbox"/>	Office Projects
Other areas of interest _____		

OTHER HOUSEHOLD MEMBER JOINING

NAME _____ BIRTHDAY _____
EMAIL ADDRESS _____ CELL PHONE _____

HOW WOULD YOU LIKE TO VOLUNTEER? CIRCLE ONE OR MORE

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EMERGENCY CONTACT _____ EMERGENCY PHONE _____

MEMBER BENEFITS: Voting rights, newsletter, free birthday meal, free daily activities, an exclusive invitation to the annual member appreciation event, 20% off room rentals, Member of the Month with premier parking space, help govern the Center.

EMERGENCY: We may contact emergency services in case of concern for your welfare. Members assume any responsibility of risk.

PRIVACY: UKCSC does not sell our membership data or participate with any 3rd party to distribute member data. Your privacy and trust are our top priorities. If you receive any solicitation claiming to have access to our member list, please know that it is not authorized by us. We're here to support and protect our community. Your photo may be used for promotional purposes.

FOR OFFICE USE ONLY

Date payment received _____	Amount paid _____
Cash or check (Receipt attached) _____	Check # (Attached a copy attached) _____
Received by _____	<u>1 Copy in Binder. 1 Copy with Daily Receipts.</u>