



MEMBERSHIP APPLICATION

Date _____

Name _____

Name (2) _____

Street _____

City _____ Zip _____

Phone _____ Email _____

Please enroll me/us as Penobscot Valley Senior College member(s) for the period beginning July 1 and ending June 30. (Note: a new member who enrolls between January 1 and June 30 pays only \$15.)

_____ **I am enclosing \$25 in required annual dues, or \$40 for two people**

at the same address: \$ _____

_____ **I/we are joining between January 1-June 30, for \$15 each:** \$ _____

Please specify any visual or audio accommodations needed:

Make checks payable to Penobscot Valley Senior College and mail to:

Penobscot Valley Senior College
450 Essex Street
Bangor ME 04401

How do you prefer to receive communications and our newsletter?

_____ U.S. mail _____ Email

PVSC exists only because members are generous with their time. Could you help with one of these?

_____ Curriculum _____ Finance _____ IT
_____ Special events _____ Marketing and PR