

# MEMBERSHIP APPLICATION



## COUNCIL ON AGING OF KENT COUNTY

P.O. BOX 324 • BYRON CENTER, MI 49315

TIN # 38-2711268

COA MEMBERSHIP YEAR RUNS FROM SEPTEMBER TO MAY.  
DUES ARE \$35 PER ORGANIZATION IF PAID BY DECEMBER 1ST.  
AFTER DECEMBER 1ST, DUES INCREASE TO \$40.

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip Code: \_\_\_\_\_

Amount Enclosed: \_\_\_\_\_ Date: \_\_\_\_\_

List individuals in your organization who would like to receive the newsletter:

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

**PLEASE MAKE CHECKS PAYABLE TO: COUNCIL ON AGING OF KENT COUNTY**

**PLEASE MAIL CHECKS TO: PO Box 324, BYRON CENTER, MI 49315**

By joining the COA, you are agreeing to let your image be published online if needed.

