



Providing hope, activity & service.

*We are a group of physically & socially active men and women over 50, organized to provide hope, activity & service for our members & the "senior" community at large.*

<b>SENIORS ON THE MOVE MEMBERSHIP APPLICATION</b>		
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<b>APPLICANT INFORMATION</b>		
Name:		
Date of birth:	Home Ph.	Mobile Ph.
Address:		<b>EMAIL:</b>
City:	State:	ZIP Code:
Birthday:	Are you retired?	
<b>EMERGENCY CONTACT</b>		
Name:		
Address:		Phone:
City:	State:	ZIP Code:
Relationship:		
<b>SPOUSE INFORMATION IF JOINT MEMBERSHIP</b>		
Name:		
Birthday:		Phone:
<b>WHO REFERRED YOU TO SOTM</b>		
Name	Address	Phone
<b>CHILDREN IF MEMBERSHIP PRIVILEGES DESIRED</b>		
Name	Age	
Name	Age	
<b>SIGNATURES</b>		
I authorize SOTM to use photo images of me while engaged in SOTM activities to promote and publicize SOTM activities, such as in press releases and social media.		
Signature of applicant:		Date:
Signature of spouse <i>(only if for a joint membership)</i> :		Date: