



Congress of California Seniors Individual / Couple Membership Application

- 1 year ----- \$15.00
- 3 years ----- \$40.00
- Lifetime -- \$200.00

Enclosed is my check in the amount of: _____

Name _____

Address _____ Apt _____

City _____ State _____ Zip + 4 _____ + _ _ _ _

Phone _____ E-mail: _____

Name of Spouse _____ Year of Birth _____

Referred By _____

Please make checks payable to CCS

Mail to: Congress of California Seniors

1230 N Street, Suite 201

Sacramento, CA 95814

(800)543-3352

info@seniors.org