



Bay Area Coalition of Deaf Senior Citizens, Inc.

Non-Profit 501(3)(c) Organization

MEMBERSHIP APPLICATION

*All information will remain confidential. *

**Membership dues: \$10.00 per Person for 3 years
(Jan 1, 2025 – Jan 1, 2028)**

ANYONE who is 50 years old or better is welcome to join.

Members who are 90 or older get free lifetime membership and need to fill out this form.

Please print clearly

Name: _____ Birthdate _____
(mm/dd/yyyy)

E-Mail: _____ VP #: _____

Name: _____ Birthdate _____
(mm/dd/yyyy)

E-Mail: _____ VP #: _____

Address: _____

City: _____ State: _____ Zip: _____

Total Membership Dues: \$ _____

Please fill out this form and send with your check or money order payable to **BACDSC** and mail to:

BACDSC
c/o Maureen Nieves, Treasurer
8002 Iglesia Drive
Dublin, CA 94568



Check our website: www.bacdsc.org

FOR OFFICE USE:

(Please do not fill this out)

Check or MO # _____ or Cash _____ Amount \$ _____ Date rec' _____ Expired Date _____ Init _____

Check or MO # _____ or Cash _____ Amount \$ _____ Date rec' _____ Expired Date _____ Init _____