



Northview Senior Citizens

2021 Membership Renewal Form

Name(s): _____

(Please list your name as you would like it to appear on your nametag.)

Street Address: _____

City State and Zip: _____

Phone: (Home) _____ (Cell) _____

Email: _____

Do you live in Plainfield Charter Township? YES NO (Circle one)

Do you live in the Northview Public School District? YES NO (Circle one)

Emergency Contact Information

check here if no changes

Name	Phone Number	Relationship
1.		
2.		

Benefits of Membership

Two week priority registration for programming	✓
Newsletter mailed to you 5x/year	✓

Our membership fee is \$12 per person for January 1 - December 31, 2021.

Enclosed is a check for:

Membership fee (\$12/person) \$ _____

Donation for the Touring Audio Fundraiser \$ _____

I would like to roundup/donate in the amount of: \$ _____

Total enclosed: \$ _____

Make checks payable to: *Northview Public Schools*

**Mail to: Northview Senior Citizens
4365 Hunsberger N.E.
Grand Rapids, MI 49525**