

For office use - ID #: _____

Brooklyn Senior Center— 55 years or older

Sign Up Sheet for Resident Membership

Name: _____

Address _____

City / State / Zip _____

Birth Date (MM/DD/ Year) _____

Home Phone: _____

Cell Phone: _____

E-Mail: _____

Emergency Contact Name: _____

Relationship: _____

Phone Number: _____

Fill this form out and then bring it in to get your Membership Card at No Cost for Brooklyn Residents – or Mail this to us at: The Brooklyn Senior Center – 7727 Memphis Ave. Brooklyn, OH 44144 – OR you can also fax it to us at FAX # 216 635-4273