



MEMBERSHIP APPLICATION

Join the East End United Community Center Today!

Your Name _____ Email _____

Business or Organization _____

Date of Birth (DOB) _____ Family Size _____

Address _____

City/State/Zipcode _____

Home Phone: _____ Alternative Phone# _____

Place of Employment _____

Job Title _____ Work phone _____

What membership are you interested in? (Put an "X" in any box that apply)

- (a) Individual Adult (\$20)
- (b) Individual Child (\$10)
- (c) Individual Senior 60 + (\$15)
- (d) Family (up to 5) (\$45)
- (e) Sustaining Member (\$500)
- (f) Contributing Member (\$250)
- (g) Sponsoring Member (\$100)
- (h) Patron (\$25)

Family Members Name	Age	Date of Birth

Signature _____ Date _____

Please send checks or money orders payable to EEUCC at 150 Coolspring Street, Uniontown, PA 15401
 Telephone: (724) 437-1660 Fax: (724) 438-4620

Thank you for your Interest!