



**Organization of Active Adults
Membership Application**

Minimum Age: 50. Dues: \$20 per person per 9/1-8/31 college year (no prorations or refunds). Make checks payable to MCCOAA and mail with completed form (detach membership card) to: MCCOAA Membership, Great Path, MS #16, P.O. Box 1046, Manchester, CT 06045-1046.

Last Name 1		Select preference: <input type="checkbox"/> Mr & Mrs <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss	
First Name 1		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth ____/____/____
First Name 2		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth ____/____/____
Last Name 2 (only if different)		Select preference: <input type="checkbox"/> Mr & Mrs <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss	
Address		City	State Zip
Home/Cell Phone		Email	Select one: <input type="checkbox"/> New Member <input type="checkbox"/> Renewing Member
Amount Enclosed (no cash)	Check Number	Check Date	Would you be willing to serve on the OAA Board or a committee? <input type="checkbox"/> Yes <input type="checkbox"/> No

OFFICE USE ONLY: Effective Date: _____ (date postmarked or delivered to OAA or Continuing Education)

FILL IN, DETACH AND KEEP THIS MEMBERSHIP CARD.

MCCOAA MEMBERSHIP CARD

Member Name(s)

Valid through August 31, 20 _____

MCC Organization of Active Adults

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www.manchestercc.edu/oaa

In partnership with Manchester Community College