

SOCIAL MEMBERSHIP APPLICATION

The Village at Kentlands & Lakelands is a non-profit organization. Applications will be reviewed within two (2) business days of receipt and a phone interview will be scheduled to complete the application process. The information you provide in this application will be used for administrative, record-keeping and statistical purposes only and will be kept strictly **CONFIDENTIAL**.

PERSONAL INFORMATION		
First Name	Middle Initial	Last Name
Date of Birth (MM/DD/YYYY)	Email Address (that you check reg	ularly)
Street Address		
City	State	Zip Code
Best Daytime Phone Number	Best Evening Phone Number	Cell Phone Number
EMERGENCY CONTACT INF	ORMATION	
First Name	Last Name	Relationship
Street Address		
City	State	Zip Code
Phone Number	Email Address	
REFERRED BY		
First Name	Last Name	Organization
Phone Number	Email Address	



SOCIAL MEMBERSHIP APPLICATION

MEI	MBERSHIP PLAN	N							
Please	select the desired	membership level and pl	an.						
	Individual Plan		This plan is for a single person, 55 or older, with annual dues totaling \$100.00 .						
	Household Plan		This plan is for a household with at least one person, 55 or older, with annual dues totaling \$150.00 .						
reasor subsid Wiesm AD D	ns. We offer seven ized dues. If you han, at ljkw@veriz	esident of Kentlands or I ral options including, fle would like more informa on.net All requests for f EHOLD MEMBERS all those who will be included	xible payment ation regarding inancial consic	scheduling, tempora g these please contact leration will be kept s	rily ro t our	educed du Treasurer	es, and , Linda		
First	Name	Last Name		Relations	nip		Age		
First	Name	Last Name		Relations	nip		Age		
	THOD OF PAYM								
Pleas	se select the preferi	red method of payment.	Cash		l	PayPal			
Mak	e checks and mon	ey orders payable to:	140 Chevy	Kentlands and Lakela Chase St. # 302 urg, MD 20878	ınds,	Inc.			
agree	that VKL may, for p	publicity and other purpos	es use my image	e and/or any comment	or qu	otation ma	de by me.		
Membei	Signature			Date		_			
PRINTED	NAME:								
Complet	ed by	on behalf of Member		Da	ite:				