



2021-2022 MDSC Membership Form

(July 1, 2021 - June 30, 2022)

mddeafseniors@gmail.com * www.mddeafseniors.org * Maryland Deaf Senior Citizens, Inc. (Facebook)

Please fill out and mail this membership form to **Cathy Thompson, MDSC Treasurer, at 2423 Hunting Lane, Waldorf, MD, 20601-2929**, with cash or check payable to **MDSC**. You can also pay via Cash App at \$MDSC2020 and mail the filled membership form to Cathy. Any questions, contact Cathy at gibberd56@gmail.com or 301-710-6053 VP.

MEMBER(S) INFORMATION (FOR INTERNAL USE ONLY)

SELF	PARTNER/SPOUSE
LAST NAME:	LAST NAME:
FIRST NAME:	FIRST NAME:
HOME ADDRESS:	HOME ADDRESS:
EMAIL ADDRESS:	EMAIL ADDRESS:
VP NUMBER:	VP NUMBER:
TEXT NUMBER:	TEXT NUMBER:
CASH APP:	CASH APP:
BIRTH DATE (DD/MM/YYYY):	BIRTH DATE (DD/MM/YYYY):
ANNIVERSARY DATE (DD/MM/YYYY):	ANNIVERSARY DATE (DD/MM/YYYY):
EMERGENCY CONTACT (Full name and contact information. If not, 911 will be contacted.)	EMERGENCY CONTACT (Full name and contact information. If not, 911 will be contacted.)
ALLERGIES:	ALLERGIES:
FOOD PREFERENCES: Circle - gluten free / sugar free / vegan / vegetarian / no restrictions	FOOD PREFERENCES: Circle - gluten free / sugar free / vegan / vegetarian / no restrictions
MEMBERSHIP covers admissions and zoom links to special presentations, special email announcements, door prize drawings, food and beverages, general expenses, and voting rights. DUES \$ <u>25.00</u> DONATION (optional): MDSC is a 501(c)(3) organization so contributions are tax-deductible. <ul style="list-style-type: none"> MDSC General Fund \$ _____ Deaf-Blind Interpreting Fund \$ _____ SSP for Deaf-Blind members Fund \$ _____ Discretionary fund to support individuals with financial needs \$ _____ Special Occasion: \$ _____ <ul style="list-style-type: none"> () Anniversary/Wedding () In Honor/Memory of _____ \$ _____ () Retirement () Birthday Other: _____ \$ _____ 	MEMBERSHIP covers admissions and zoom links to special presentations, special email announcements, door prize drawings, food and beverages, general expenses, and voting rights. DUES \$ <u>25.00</u> DONATION (optional): MDSC is a 501(c)(3) organization so contributions are tax-deductible. <ul style="list-style-type: none"> MDSC General Fund \$ _____ Deaf-Blind Interpreting Fund \$ _____ SSP for Deaf-Blind members Fund \$ _____ Discretionary fund to support individuals with financial needs \$ _____ Special Occasion: \$ _____ <ul style="list-style-type: none"> () Anniversary/Wedding () In Honor/Memory of _____ \$ _____ () Retirement () Birthday Other: _____ \$ _____
TOTAL \$ _____	TOTAL \$ _____
DATE RECEIVED ____/____/____	CASH APP ____ CHECK # ____ CASH ____