

# Tri-State Prime Timers Membership Application

**Please print clearly. All \*'d items must be answered to process application.**

**This is a  New Membership  Renewal/update of a membership.**

## Personal Information

*First name (as you wish it printed on name tag)	*Last name	Birthday
Partner's name (as it is to appear with applicant in directory see below) Attach separate application with partner's information		Anniversary Date
*Mailing Address		
Tri-State Prime Timers <input type="checkbox"/> may <input type="checkbox"/> may not mail Prime Timers materials to me at this address		
Phone numbers(s) at which Prime Timers can contact you Primary: _____ Secondary: _____		
Email address at which Prime Timers can contact you		
*Signature	*Date	

**Discretion is paramount in all actions and activity of Tri-State Prime Timers. Personal information will be kept confidential unless you give permission below to publish all or part of it in Tri-State Prime Timers materials.**

**Directory information**  include  do not include my name and contact information in the directory. If you checked "do not include" then skip the rest of this section

Print <input type="checkbox"/> full last name <input type="checkbox"/> 1st initial of last name only
Print mailing address <input type="checkbox"/> yes <input type="checkbox"/> no
Print <input type="checkbox"/> primary phone# <input type="checkbox"/> secondary phone#
Print email address <input type="checkbox"/> yes <input type="checkbox"/> no

**This application cannot be accepted unless ALL the following statements are answered and initialed:**

I understand that the Tri-State Prime Timers Directory is given only to Members for their own personal use. <i>I agree to keep. The Directory and its contents private and confidential</i> Initials: _____
I direct TSPT to send their newsletter via <input type="checkbox"/> email <input type="checkbox"/> US mail <input type="checkbox"/> do not send. Initials _____
If US Mail was selected please add \$12.00/year for postage and handling
I understand that Tri-State Prime Timers does not discriminate on the basis of race, color, creed, national origin, or HIV status Initials: _____
I understand that the use of illegal drugs is not permitted at Tri-State Prime Timers functions. Initials: _____
I am at least 21 years of age. Initials: _____

## Annual Membership Dues (Due Jan. 1) Checks Payable to Tri-State Prime Timers

\$20 Annual Membership  \$50 Three-Year Individual

If US mail is preferred please add \$12.00/year for postage and handling

- New members joining after July 1 pay at one-half the above rate.
- New members joining after October 1 may pay full price for a membership good through December 31 of the following year.

**Mail to: Tri-State Prime Timers, P.O. Box 141205, Cincinnati, OH 45250-1205  
www.tristateprimetimers.com**