Widowed Persons Association of California, Inc.™, Inc. Sacramento Chapter #1

2628 El Camino Ave., Ste. D-18, Sacramento Chapter, #1 Sacramento, CA 95821-5936, (916) 972-9722 Web Site: <u>http://www.sacwidowed.org</u>

\checkmark	"A grief shared is a grief diminished"™				
	Membership A	pplication			
NAME First Middle Last	Nickname (Bac	BIRTHDATE: lge)	<u> </u>		
ADDRESS:Street PHONE: () CELL PHON FORMER MEMBER OF THIS CHAPTER, YE	,	State	Zip Code		
HOW DID YOU LEARN OF WPAC™?					
DEATH CERTIFICATE REQUIRED					
SPOUSE'S NAME DATE OF DEATH://					
I HAVE NOT REMARRIED SINCE THE DEA	<u>TH</u>				
Signature:	DAT	`E://			
EMERGENCY CONTACT					
	RELATIONSHIP				
NAME	RELATION	SHIP			
NAME PHONE (
PHONE () ADDRESS: MY SKILLS i.e., Office/Computer, WPAC V INTERESTS	Street City olunteer (Newsletter/Special Even	State ts/Fund-Raising)	Zip Code		
PHONE () ADDRESS: MY SKILLS i.e., Office/Computer, WPAC V INTERESTS i.e., Bowling/Billiards, Travel/D DUES: Jan 1st through Dec. 31 st : \$150.00 DUES: July 1 st through Dec. 31 st : \$80.00	Street City olunteer (Newsletter/Special Even Day Trips, Games/Cards, Dance/Ex o or can be paid \$90.00 by Februar).	State Its/Fund-Raising) Rercise, Dining Out/En	ntertaining		
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PHONE () ADDRESS: MY SKILLS	Street City olunteer (Newsletter/Special Even Day Trips, Games/Cards, Dance/Ex) or can be paid \$90.00 by Februar).	State Its/Fund-Raising) ercise, Dining Out/En ry 15 th and \$60.00 by o	ntertaining June 30 th .		
PHONE () ADDRESS: MY SKILLS	Street City olunteer (Newsletter/Special Even Day Trips, Games/Cards, Dance/Ex o or can be paid \$90.00 by Februar o. Dues Amt:	State Its/Fund-Raising) Itercise, Dining Out/En Try 15 th and \$60.00 by Check # Date:	ntertaining June 30 th .		

I have read this waiver:

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