



Our Charlotte Elder Affairs Network

Waves of Support for Senior Citizens

2010 MEMBERSHIP APPLICATION

(Annual dues are \$50/organization – up to (3) three participants per organization)

Date: _____

OCEAN Web Site: www.ocean-fl.org

Organization: _____

Mailing Address: _____

How did you hear about OCEAN? _____

Participant Names (up to 3 company representatives)

1) _____ E-mail _____

2) _____ E-mail _____

3) _____ E-mail _____

1) Ph _____ Cell _____ Fax _____

2) Ph _____ Cell _____ Fax _____

3) Ph _____ Cell _____ Fax _____

Please Mail This Entire Form To: OCEAN, PO Box 496269, Port Charlotte, FL 33952

OCEAN membership dues received from: _____
Organization/Member

Check (\$50) Check # _____

Cash (\$50)

Received by: _____ (Treasurer) Date received: _____