

Not a Member – Become one TODAY!



2020
Membership Renewal and Dues
INVOICE

3757 Indianola Ave., Columbus, OH 43214
Phone: (800)796-6272 Fax: (614)784-9771 E-mail: krc@pacainc.com
Website: www.ohioasc.org

Bill Date: December 2020

*Please complete your membership information in the appropriate spaces.
For Organizational Membership, please list a second member's information.*

Name: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-Mail: _____ PSA: _____

Program Planner/Activity Director's Name: _____

E-Mail: _____ Phone: _____

*Cost of membership is based on Senior Center Budget.
Check the appropriate membership category below.*

Under \$100,000/Individual/Professional
_____ \$75

\$100,000 - \$250,000
_____ \$100

\$250,000 – \$500,000
_____ \$150

\$500,000 - \$1,000,000
_____ \$250

Over \$1,000,000
_____ \$500

Associate
_____ \$500

(Over)

Please list email addresses of Newsletter recipients

Name

E-Mail

1. _____
2. _____
3. _____
4. _____
5. _____

Please tell us which services your agency provides:

- Home Delivered Meals Homemaking PASSPORT/Personal Care
- Transportation Adult Day Services Congregate Meals Vendor/Corporate Partner
- Social, Recreational, Educational, Cultural, Wellness Activities Chore/Home Repair
- Other – please list _____ None – Do not provide direct services

Return completed application with payment to: OASC 3757 Indianola Ave., Columbus, OH 43214.

Thank you for supporting OASC!

www.ohioasc.org