

**South Austin AARP Chapter 2426  
Annual Membership Renewal - 2021**

**PLEASE PRINT**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ National AARP Member No. \_\_\_\_\_

Birthday (Month and Day) \_\_\_\_/\_\_\_\_/\_\_\_\_ Anniversary (Month and Day) \_\_\_\_/\_\_\_\_/\_\_\_\_

E-mail Address (Print Clearly) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Dues are \$10.00 by cash or check

Dues are waived if you are 85 or older: Yes \_\_\_\_\_

Complete and mail this renewal with your payment to (checks should be made payable to South Austin AARP Chapter 2426).

*South Austin AARP Chapter 2426, Bill Nicholson, 12512 Gun Metal Dr., Austin, TX 78739*

Please check any committee(s) on which you are interested in serving:

<input type="checkbox"/> Program	<input type="checkbox"/> Membership	<input type="checkbox"/> Hospitality	<input type="checkbox"/> Telephone
<input type="checkbox"/> Sunshine	<input type="checkbox"/> Legislative	<input type="checkbox"/> Community Serv	<input type="checkbox"/> Health Care
<input type="checkbox"/> Travel (ad hoc)	<input type="checkbox"/> Public Relations	<input type="checkbox"/> Newsletter	