

Membership Application – 2010

Please complete the application form below and send it with your membership fee(s) of \$10.00 for employees and \$10.00 for each additional member residing at the same address. The fiscal year runs from January 1 thru December 31 only; **dues are not pro-rated.**

Check one and complete the application below (please P-R-I-N-T)
 Membership Renewal **New Membership** **New Address**

Last Name: _____

First Name and Middle Initial: _____

Additional Member Name: _____

Street Address: _____

City, State, Zip: _____ Phone: () _____

E-mail: _____

******* Do not cut, reduce, or mutilate any part of this form *******

NEW MEMBERS ONLY: (complete the information below)

Membership Eligibility for Primary Member: 50 yrs. of age or more and
5 or more years of service; D.O.B. _____ (optional)

Check one:

_____ Xerox (employee / retiree)

_____ Xerox contract employee

_____ Xerox affiliate employee - Affiliate organization: (Example: EDS, GE Capital, Xceedfinancial Credit Union, other) _____

_____ Spouse/significant other/family member of eligible member

Brief Biography (optional): _____

How did you hear about the Pioneer Club?

Word of mouth ___ / Flyer ___ / Newspaper ___ / Website ___ / Other ___

Make check payable to **XXR Pioneer Club** and send it along with completed application to the current club treasurer:

Eugene Lochner
7568 Salmon Creek Rd.
Williamson, NY 14589

OFFICE USE ONLY

Amt Paid: \$ _____ Check No: _____ Date: _____