**Office Processed QB\_\_\_\_\_\_\_ CC\_\_\_\_\_\_\_ ML\_\_\_\_\_\_\_ OD\_\_\_\_\_\_\_**

**2025** Membership Form

An Alliance of Aging Forward

Name(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail (required) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place of Worship \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REMINDER – You can register and pay online at:** [**www.shepherdscentertopeka.org**](http://www.shepherdscentertopeka.org)**, drop your registration and payment off at the Lowman Office, or mail your registration form and payment to SCT 4101 SW 15th ST, Topeka, KS 66604**

 **2025** Membership Dues per Calendar Year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ x $40.00 =\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Make Check Payable to SCT – Check Total = $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Check # \_\_\_\_\_\_\_\_\_\_\_\_

 Photo taken (or submitted to pjzog@yahoo.com) for membership directory? Yes \_\_\_\_\_ No \_\_\_

Where did you learn about us? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age Group(optional) 55– 59 \_\_\_\_ 60-64\_\_\_\_ 65-69\_\_\_\_ 70-74\_\_\_\_ 75-79\_\_\_\_ 80-84\_\_\_\_ 85-89\_\_\_\_ 90-94\_\_\_\_ 95+ \_\_\_\_\_

**Willing to Volunteer? Shepherd’s Center is an organization dependent on our volunteer members.  We would like to include you in our mission.** (Check an area you might be interested in, and the coordinator for that group will contact you.)

* AIL Planning Committee – This group of volunteers works on contacting speakers to share their knowledge or guide discussions for our Adventure in Learning classes.
* Office Assistance – Assist our Office Manager with any projects she may need help with.
* Registration – Help with name tags at Adventures in Learning
* Greeters/Hospitality – Welcome members and visitors to our Adventures in Learning classes or help serve coffee during the AIL sessions.
* Presenting Speakers/Programs—Introduce the speakers warmly before their presentations, ensure they stay within the allotted time, and complete the provided thank-you note afterward.
* Facility Management—Help set up tables and chairs on Thursdays before AIL and assist with putting them away on Fridays after AIL.

---------------------------------- Cut along this line and keep the bottom portion for your receipt. -----------------

Shepherd’s Center of Topeka yearly dues:

**2025** Membership Dues per Calendar Year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ x $40.00 = \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Paid by: Check # \_\_\_\_\_\_\_ Online: \_\_\_\_\_\_ Cash: \_\_\_\_\_\_