

**AARP Chapter # 1276**  
**Membership Application**

Single Dues: \$8.00 Annually    (Circle One)    Family Dues: \$16:00 Annually

Full Name(s): \_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

National AARP Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

**Please print this application and mail with your check made payable to:**

**AARP Chapter #1276  
P.O. Box 117  
Delmar, DE 19940**

**You may also come to a meeting and pay in person via exact cash or check (preferred).**

**For questions, please call Sandy Dickerson, Membership Chairman, 302-846-9761.**