

Coastal Senior College
University College at Rockland
91 Camden St Suite 402
Rockland ME 04841

2016-2017 MEMBERSHIP REGISTRATION FORM (Membership Dues of \$25 Good Through 6/30/17)

Name: _____ Email _____

Address: _____ City _____ State _____

Zip Code _____ County _____ Phone _____

NEW MEMBERSHIP **OR** RENEWAL MEMBERSHIP (circle one)

Payment Amount: _____

Payment Type: _____ Cash _____ Check _____ Credit Card

Credit Card # _____ Exp. Date _____ Security Code _____

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