

**MATURE SINGLES PLUS**  
*Friendship, Fun, Social Events*  
**2026--New Member Application**

(Please **print** clearly) **Name:** \_\_\_\_\_

**Birthday** (Optional-complete if you wish your birthday published in the *Jingle*) \_\_\_\_\_ (Month & Day only)

**Address:** \_\_\_\_\_ Apt. \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone Number(s):** \_\_\_\_\_

**E-mail address** \_\_\_\_\_

**Monthly Jingle Delivery Options:** (Please check one.)

- \_\_\_\_\_ I will receive the monthly ***Jingle*** **via my e-mail** listed above and will pay the annual dues of **\$20.00.** ( \_\_\_ US Veteran rate: \$10)
- \_\_\_\_\_ I will receive the monthly ***Jingle*** **via post office mail delivery** at my address listed above and will pay the annual dues of **\$55.00.** ( \_\_\_ US Veteran rate: \$27.50)
- \_\_\_\_\_ I would like to receive the monthly ***Jingle*** **via BOTH post office delivery** at my address listed above & **my e-mail** listed above. I will pay the annual dues of **\$55.00.** ( \_\_\_ US Veteran rate: \$27.50)

**Privacy Preference:** (Please check one \_\_\_\_\_ Yes \_\_\_\_\_ No )

My contact information may be included on the *General Membership List* that is available to members.

**How did you hear about Mature Singles Plus?** \_\_\_\_\_

**Comments, Suggestions, Ideas, etc.** (These will be shared with the officers of the club.)

**Disclaimer:** Members hereby accept any and all risks of injury or property damage to the Member, the Member's family members or guests sustained while involved in any event or activity incident to membership in Mature Singles Plus. The Member agrees to release and hold Mature Singles Plus and its respective directors, officers, committees, and members harmless from any and all liability arising out of or connected to a member's participation in any Mature Singles Plus activity or event in accordance with the provisions of Article 3, Purposes of the By-Laws. (By-Laws and Rules can be found on our website.)

**Member's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please complete the entire form and send it along with your check (*payable to **Mature Singles Plus***) to our Membership Chairperson:

Susan Szymczak

9120 W. Highland Park Ave #352

Franklin, WI 53132 (Please be sure to include the Apt #352)