

HUDSON SENIOR CENTER

Registration Fee Yearly Update



Name(s): _____

ID Number(s): _____

UPDATED INFORMATION (for self or emergency contact)

Name: _____

Address: _____

Phone Number: _____

Cell Phone Number: _____

Work Phone Number: _____

UPDATED CAR INFORMATION (if changed)

Make: _____

Model: _____

Year: _____

Color: _____

Plate Number: _____

SENIOR CENTER REGISTRATION FEE

Year: _____ Paid: _____ Check #: _____

Office Use: _____