OCEAN
Our Charlotte Elder Affairs Network

OCEAN Organization / Membership Application

- **Annual Dues are $100.00 per Organization / Member per Year**
  - Up to Three (3) Organization Representatives are Allowed to be listed on the Membership List
- **PLEASE FILL OUT APPLICATION IN ITS ENTIRETY EVEN IF IT IS THE SAME AS LAST YEAR**

IMPORTANT: This information is NEEDED for the Membership List that is available to all members.

Date of Application: _____

Name of Organization / Member: _____

Address: _____

City / State / Zip Code: _____

If you are a new Organization or Member, how did you hear about OCEAN? _____

Referred by: _____

1) Representative / Member Name: _____
   ☐ *OCEAN has my permission to use my photos / company's photos on social media from events, outings, and meetings.*

   Email: _____
   ☐ *OCEAN has my permission to share my email for membership purposes.*

   Best Number for Contact: _____

2) Representative / Member Name: _____
   ☐ *OCEAN has my permission to use my photos / company's photos on social media from events, outings, and meetings.*

   Email: _____
   ☐ *OCEAN has my permission to share my email for membership purposes.*

   Best Number for Contact: _____

3) Representative / Member Name: _____
   ☐ *OCEAN has my permission to use my photos / company's photos on social media from events, outings, and meetings.*

   Email: _____
   ☐ *OCEAN has my permission to share my email for membership purposes.*

   Best Number for Contact: _____

Please make check payable to OCEAN
You may pay Membership with your Card by scanning the **QR code** or by going to our web site
http://www.ocean-fl.org/ and clicking on the PayPal link: **'Pay for Membership'**
Mail This Entire COMPLETED Form To: OCEAN, PO Box 496269, Port Charlotte, FL 33949-6269
Email Membership questions to: OceanPortCharlotte@gmail.com

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FOR INTERNAL USE ONLY
OCEAN membership dues received from: _____
                                        Organization/Member
☐ Check ($100) Check # _____   ☐ Cash ($100)   ☐ PayPal ($100)

Received by: _____ as (Treasurer)   Date received: _____

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What We Do
We receive requests for seniors or other referral sources needing a variety of assistance. We contact that senior to determine the options we have to provide a solution.

Who We Help
We evaluate all requests on their ability to make a difference and the resources we have to perform the request. Our focus is seniors in our surrounding areas of Port Charlotte.

Donate To Help
Your donations help us fulfill the unmet needs. We make donating easy for your transactions. Every dollar can make a difference. Can we count on your donation today?