



**Pennsylvania Association
of Senior Centers**

www.paspulse.org
info@paspulse.org

*PASC serves as YOUR
Voice in Harrisburg . . .*

About PASC:

The Pennsylvania Association of Senior Centers (PASC) is the only professional organization in Pennsylvania dedicated to advocating for Senior Centers and the consumers we serve.

PASC works to:

- Provide professional training for the enhancement of Senior Center activities.
- PASC was instrumental in the development of the Senior Center Grant Program and continues to advocate for the senior center line item in the Pennsylvania General Budget.
- PASC representatives meet regularly with staff from the Department of Aging, other state organizations, collaborative, and legislators.
- PASC promotes communication and advocacy efforts with the policymakers in the Commonwealth.
- PASC collaborates with other agencies and member organizations on issues which effect home and community services for older adults.
- PASC provides ideas and information for improving the operation of Senior Centers in Pennsylvania.

Your Membership in PASC Includes:

- ✓ Attendance at the annual and regional conferences at a discounted rate.
- ✓ Membership newsletter and e-mail updates providing advance notice regarding upcoming PASC events and public policy alerts.
- ✓ A PASC created website with member-exclusive content sharing ideas, information, and center opportunities.
- ✓ Professional training and development opportunities throughout the state including a Professional Certificate Program offered through Penn State University.
- ✓ Networking opportunities on a regional and statewide level to provide creative, successful programming and fundraising ideas.



PASC MEMBERSHIP FORM

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Please note: It is important that you complete all of the requested information below so that we can apply your payment correctly and contact you if we need to do so. If you are using one check to pay for more than one membership, please include an individual form for each member and center.
Please attached your business card.

Date: _____ I am: ___ A New Member (\$60) or I am ___ A Renewing Member # _____ (\$40)

Name: _____ Title: _____

Center Information: _____ Please Circle Your Region: NE SE C SW NW

Name: _____ County: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Web Address: _____ Fax: _____

I am interested in serving on a PASC Committee:

_____ Membership _____ Professional Development _____ Public Policy _____ Public Relations

Make Check Payable to: PASC and mail with the completed membership form(s) to Attn: Judy Holden

Pennsylvania Association of Senior Centers (PASC)

P.O. Box 104, Laughlintown, Pennsylvania 15655

If you have questions or wish to speak with a current member of the PASC Board of Directors please contact us via info@pascpulse.com and tell us the best way/time to reach you. A Board Member will contact you.

By becoming a Member of PASC you authorize your name and contact information to be included in the PASC membership directory. The PASC mailing list will not be sold.

-----Please Do Not Write Below This Line-----

Name: _____ Member # if Renewal: _____ Amount Paid: _____

Center/Organization Name: _____

Date Received: _____ Check or Money Order #: _____ Date Deposited: _____

Received by : _____ Date to Treasurer: _____ Treasurer Initials: _____