

**Senior Center
BOARD OF DIRECTORS**

President/Chairperson

Name: _____

Address: _____ City _____ Zip _____

Home #: _____ Cell #: _____

Email: _____

Vice President/Chairperson

Name: _____

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Name: _____

Address: _____ City _____ Zip _____

Home #: _____ Cell #: _____

Email: _____

Treasurer

Name: _____

Address: _____ City _____ Zip _____

Home #: _____ Cell #: _____

Email: _____