



**INDEPENDENT COUNCIL ON AGING (ICA)**  
**2022-2023 Membership Application**  
Mail this application with your check to the address below.  
Application and payment are due by October 2022.  
*Please include your business card, if possible.*

**NAME:**

**TITLE:**

**ORGANIZATION:**

**MAILING ADDRESS:**

**PHONE NUMBER:**

**EMAIL ADDRESS:**

**Please provide information about your organization to share with others (20 words or fewer):**

**Membership cost is \$85 for the year (September 2022- June 2023)**

Would you like to participate in one or more of ICA's committees? Check all that apply:

- By-Laws
- Finance
- Nominating
- Legislation
- Guide to Services
- Membership
- Public Relations
- Health, Mental Health, & Education Committee

***Make checks payable to ICA .***  
**Mail application and payment to:**

**ICA**  
**PO BOX 1936**  
**ERIE, PA 16512**

**Questions?**  
**Email: ICAeriePA@gmail.com**

**Check# \_\_\_\_\_ Paid \_\_\_\_\_**