



**Friends of the Duxbury COA Membership  
\$5.00 per person**

**CHECKS SHOULD BE MADE PAYABLE TO:  
Friends of the Duxbury COA  
PO Box 2113, Duxbury, MA 02331**

- \_\_\_\_\_ I want to be a “Friend” and am enclosing \$5.00  
\_\_\_\_\_ I would like to receive Duxbury Doings, the  
Duxbury Senior Center Monthly Newsletter.  
\_\_\_\_\_ I am enclosing my tax-deductible contribution to  
assist your efforts.

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**ADDITIONAL CONTRIBUTIONS:**

**In memory of:** \_\_\_\_\_

**In honor of:** \_\_\_\_\_

**Total Enclosed:** \_\_\_\_\_