



## Printable Desert Sage Membership Application

*Desert Sage Coordinator*  
*Gila Regional Medical Center*  
1313 E. 32<sup>nd</sup> Street, Silver City, New Mexico 88061  
(575) 538-4870

Select "File, Print" at the top of your Browser page or click on the "Print" Button in the toolbar

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Name:  
Today's Date:  
Mailing Address:  
City/State/Zip:  
Phone Number:  
Email:  
Birthdate:

Do you currently receive the Good Health Newsletter?  Yes  No

- Enclosed is payment of \$10 for a 1 year membership.  
 Enclosed is payment of \$75 for a lifetime membership.

Make checks payable to GRMC. Mail this application along with payment to:  
Desert Sages Coordinator, GRMC, 1313 E. 32<sup>nd</sup> Street, Silver City, NM 88061

We look forward to meeting you at our next event!