



CITY OF BUFFALO



Mayor Byron W. Brown

DEPARTMENT OF COMMUNITY SERVICES & RECREATIONAL PROGRAMMING

DIVISION OF SENIOR SERVICES

Byron W. Brown
Mayor

Tanya Perrin-Johnson
Commissioner

Douglas R. Ruffin
Director

SENIOR DISCOUNT CARD APPLICATION

Name _____ Age: _____ Date of Birth: _____ Address _____
Zip Code: _____ Home Telephone # _____
Senior Center/Organization: _____ Telephone: _____

Signature/Certification: _____
(I certify that the information provided above is true and correct.)

Related Questions: Please answer the following questions in order for us to better serve you!

- Do you have a Drivers License? Yes: _____ No: _____ Non-Divers _____
- Do you have access to private transportation? Yes: _____ No: _____.
- Do you use a personal computer (PC)? Yes: _____ No: _____
- Council District you live in and/or Council Person: _____
- Do you participate or attend a senior citizen center? Yes ___ No ___ If yes, which one _____.
- Do you frequently shop in the city? Yes: _____ No: _____ If yes, where do you go: Downtown: _____ Elmwood: _____ Hertel Ave. _____ Bailey Ave. _____ South Buffalo _____ Other _____.
- Do you receive the senior newsletter? Yes: _____ No: _____ If no, would you like to be added to our mailing list: .Yes: _____ No: _____.
- Do you have a block club where you live: Yes ___ No _____. Would you join: Yes: _____ No: _____.
- Please indicate the closest senior center, senior housing complex or community-based organization to you. _____.
- Do you utilize or qualify for a handicap parking permit? Yes: _____ No: _____.

Information provided is considered confidential and will only be used to provide better services for the senior citizens living in the City of Buffalo. A Discount Card and Booklet will be mailed to you at the above indicated address.