SERVICES WE OFFER . . .

- Leadership development
- Legislative advocacy for older adults
- Education and training for those working in the field of aging
- A strong voice for older adults and their families in policy decisions
- Colorado Senior Resource Guidebook with resources on insurance, housing, home care and advance care planning
- Salute to Seniors Expo

SERVICES WE OFFER . . .

- Navigation to help older adults find help with Medicare, Medicaid, economic security, and home care
- Grants to low income older adults for vision, hearing and dental services
- Holiday baskets to low income seniors
- Medicare counseling for new enrollees and those needing to make changes
- Medicare Monday Education Programs

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"I joined the Colorado Gerontological Society because I wanted to know more about what is happening in the field of aging and I wanted to support all the work that is done on behalf of the clients that I work with who are primarily Medicare and Medicaid beneficiaries. The newsletter, STA-Well News provides helpful information to my clients and helps me get them more services."

Mary D, 2016
The Colorado Gerontological Society is a not-for-profit 501(c)(3) organization formed in 1980 to provide advocacy, information and assistance to Colorado seniors as well as education and networking for professionals in aging. Visit us online at www.senioranswers.org

Join Today!

Your Membership Helps to Support Our Work

Please select the type of membership:

☐ **Organizational Membership** - annual fees are $100. As an organizational member, three individuals of your choosing will receive all benefits of a Individual Membership.

☐ **Individual Membership** - annual fees are $40.

☐ **Senior** (aged 65 or older and not in paid employment) annual fees are $20.

☐ **Full time students** (who submit proof of status) annual fees are $20.

Organization Name: (if applicable) ____________________________________________________________

Address: ____________________________________________________________

Telephone: __________________ Fax: __________________

Members Name and Contact Information:

(1) ____________________________________________________________

Email: ____________________________________________________________

(2) ____________________________________________________________

Email: ____________________________________________________________

(3) ____________________________________________________________

Email: ____________________________________________________________

☐ Check/money order is enclosed or ☐ Charge my Visa / MasterCard / American Express (circle one)

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Colorado Gerontological Society

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