

Date _____

Name _____

Date of Birth _____

Home Address _____

Telephone Number _____

Email _____

Name of Spouse (name, address, telephone number)

Notify in Case of an Emergency

(a person not living with you)

Person _____

Relation _____

Address _____

Phone (____) _____

FOR OFFICE USE ONLY:

Date Received _____

Member Number _____

Method of Payment _____

Check # _____



For More Information Call:

256.571.8025

(For Arab Area Residents 256.753.8025)



Many Reasons. One Choice.

www.mmcenters.com





At Marshall Medical Centers, we believe seniors deserve special treatment. That's why we've developed GoldCare 55+... a program created to allow people 55 or older to get the most out of life. GoldCare 55+ reaches out to area seniors by promoting a healthy and independent lifestyle. Members benefit from free health screenings, discounts on wellness events, better access to Marshall Medical Center services and much more.

Comprehensive Benefits:

Streamlined Admission - information already on file makes admission easier and quicker

No Claims To File - Medicare and other insurance claims filed for you, as with any services from Marshall Medical Centers

Meal Ticket - free meals upon request for one person staying with you while you are a patient at Marshall Medical Centers

Free Notary Public Service - The GoldCare 55+ coordinator will assist you with notary services

LifeCall/Emergency Response System - affordable monthly service fee

Health Education Programs

Discounts on Wellness & Fitness Programs

Free Health Screenings

Nutritional Counseling

Quarterly Newsletter

Travel Discounts

Special Events - Annual Senior Health & Fitness Day, Lunch-N-Learns, holiday parties and more



If you are 55 or older and would like to take advantage of all the benefits our GoldCare 55+ program has to offer, complete the application on the opposite side of this panel and send it in.

If you have any questions please call us at 256.571.8025.
(For Arab Area Residents 256.753.8025)

2 Easy Ways To Apply:

1. Mail this application to the address below.
or
2. Drop off this application at the address below.

Note: Please include your one-time \$10 registration fee with your application. Checks may be made payable to: MMC GoldCare 55+.

**Mail completed application to:
Marshall Medical Center North
ATTN: Kristi Leak (Marketing)
8000 Alabama Highway 69
Guntersville, AL 35976**

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