



Centenarian Recognition Certificate Request OPTION 1: CERTIFICATE ONLY

If you have chosen **Option 1: Certificate Only**, please complete the following form in its entirety. A certificate and an “Alexandria Recognition” coin will be mailed to the honoree.

Third Party Longevity Research Study Release

Periodically, the City will receive requests from reputable Universities who are interested in learning about the Successful Aging Program for permission to interview the Centenarian and/or obtain information (e.g., Social History) that was collected for the recognition program. Personal information collected for the Centenarian Program will not be released without first obtaining permission from the Centenarian and/or their responsible party.

Please select opt-in or opt-out for the City of Alexandria to release the Centenarian and/or Responsible Party contact information. **Opt-in** **Opt-out**

CENTENARIAN INFORMATION

Date of Submission: _____

Name: _____
First
Last
Age

Name on Certificate:

Title	First	Middle	Last	Suffix
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Birthdate: _____

Email Address: _____

Phone Number: _____

Mailing Address for Certificate: _____

City State ZIP Code

Living Arrangement (list name of facility if applicable):

Facility Name: _____

City State ZIP Code

SUBMITTER CONTACT INFORMATION

Name: _____

Relationship: _____

Phone Number: _____

Email Address: _____

Please print and return form to:
Senior Services of Alexandria
Attention: Centenarian Program
206 North Washington Street, Suite 301
Alexandria, VA 22314

QUESTIONS?

Visit **alexandriava.gov/Aging**, email **admin@seniorservicesalex.org**
or call 703.836.4414, ext. 110.