



Pacific Grove Recreation Department
 Youth Center
 302 16th Street, Pacific Grove, CA 93950
 (831) 648-3134



Membership Registration

Member Information

Name		Gender M <input type="checkbox"/> F <input type="checkbox"/> Unspecified <input type="checkbox"/>	
Age	Date of Birth	Grade	School
Address		City	Zip Code
Email Address _____ @ _____			

Parent/Guardian Information

Parent/Guardian 1 Name		Relationship Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/>	
Cell Phone	Day Phone	Evening Phone	
Parent/Guardian 2 Name		Relationship Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/>	
Cell Phone	Day Phone	Evening Phone	

Emergency Contacts

In the event of an emergency and we are unable to reach a parent/guardian, please list two emergency contacts.

Emergency Contact 1	Relationship	Phone
Emergency Contact 2	Relationship	Phone

Membership Information

Membership Package (mark one): Year Membership - \$113.00
 (Valid through June 1, 2019)
 Semester Membership – \$67.00 | 1st Term ___ | 2nd Term ___
 (Valid 8/1/18-12/31/18 OR 1/1/19-6/1/19)

I affirm that all the above information is true and accurate to the best of my knowledge. I also affirm I have read and signed the policy agreement statement provided with this membership registration form.

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

OFFICE USE: Paid _____ Entered _____ Employee: _____