Wahoo Civic Center

MEMBERSHIP APPLICATION

☐ New ☐ Renewal

Membership Expiration Date: _____ / _____ / _____

Membership Type: ☐ Family ☐ Single Parent Family ☐ Adult

☐ Sr. Couple ☐ Sr. Single ☐ Young Adult ☐ Youth

Household Information

(all information must be completed)

Head of Household _____
(First) (Last)

Mailing Address _____
(Street/Apt. #) (City) (State) (Zip)

E-mail Address _____ Date of Birth _____

Home Phone _____ Work Phone _____ Cell Phone _____

*Other Family Members (if applicable)

First Name	Last Name (if different)	Relationship	Birthdate	Gender

*Note: For Family and Single Parent Family memberships…children only include dependents (up to age 23) living at the same address. Anyone age 24 and older living at home must obtain a separate membership.

I/we understand that I/we are committing to a Civic Center membership for a twelve month period. The membership is not transferable and membership dues are not refundable. I also agree to notify the Parks and Recreation office of any change in address or any change that would affect my payment procedure.

I/we understand that if my/our membership lapses for a period of more than 30 days, I/we will again be charged the initiation fee. I/we understand and agree that all members listed above must abide by all rules and regulations of the Wahoo Civic Center. Violations may result in the revocation of my/our membership privileges.

Applicant's Signature _____ Date _____

OFFICE USE ONLY

Resident (Wahoo city limits) _____ Non-Resident (outside city limits) _____

Business Discount? □ No □ Yes Business Name _____

□ Full Payment: Amount $ _____ □ Monthly Post-dated Checks: Amount/check $ _____

□ Monthly Automatic Bank Withdrawals (ACH Debits): Amount/withdrawal $ _____

Amount Paid $ _____ Paid By: Cash _____ Check _____ (#_____) Charge _____

Staff Member _____ Date Rec'd _____