

# Family Add On Membership Application

## Current Member Information

Member Name \_\_\_\_\_ Member Number \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

## New Member Information

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Relationship to Member \_\_\_\_\_

All charges will roll up to the member and only the member will be billed.

Member Signature \_\_\_\_\_ Date \_\_\_\_\_

Add On Signature \_\_\_\_\_ Date \_\_\_\_\_